

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Chapter 11 Check if this an amended filing**Official Form 201****Voluntary Petition for Non-Individuals Filing for Bankruptcy**

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>The North Carolina Theatre</u>		
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names	<u>FDBA Carolina Readers Theatre</u> <u>FDBA The Carolina Regional Theatre</u> <u>DBA The North Carolina Theatre and Conservatory</u>		
3. Debtor's federal Employer Identification Number (EIN)	<u>56-1072874</u>		
4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business	
	<u>One E. South Street</u> <u>Raleigh, NC 27601</u>	<u>3043 Barrow Drive</u> <u>Raleigh, NC 27616</u>	
	Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code	
	<u>Wake</u>	Location of principal assets, if different from principal place of business	
	County	Number, Street, City, State & ZIP Code	
5. Debtor's website (URL)	<u>https://nctheatre.com</u>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____		

Debtor **The North Carolina Theatre**
Name _____ Case number (*if known*) _____

7. Describe debtor's business**A. Check one:**

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- Chapter 7
- Chapter 9
- Chapter 11. **Check all that apply:**

- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- No.
- Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

Debtor **The North Carolina Theatre** Case number (*if known*) _____
 Name _____

- 10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**
- No
 Yes.

List all cases. If more than 1, attach a separate list

Debtor _____ Relationship _____
 District _____ When _____ Case number, if known _____

- 11. Why is the case filed in this district?** Check all that apply:
- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
 A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

- 12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**
- No
 Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____

It needs to be physically secured or protected from the weather.

It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

Other _____

Where is the property?

Number, Street, City, State & ZIP Code _____

Is the property insured?

- No
 Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

- 13. Debtor's estimation of available funds** Check one:

- Funds will be available for distribution to unsecured creditors.
 After any administrative expenses are paid, no funds will be available to unsecured creditors.

- 14. Estimated number of creditors**
- | | | |
|----------------------------------|---|--|
| <input type="checkbox"/> 1-49 | <input checked="" type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

- 15. Estimated Assets**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input checked="" type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

- 16. Estimated Liabilities**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
|---|--|--|

Debtor

The North Carolina Theatre

Name

Case number (*if known*) \$50,001 - \$100,000
 \$100,001 - \$500,000
 \$500,001 - \$1 million \$10,000,001 - \$50 million
 \$50,000,001 - \$100 million
 \$100,000,001 - \$500 million \$1,000,000,001 - \$10 billion
 \$10,000,000,001 - \$50 billion
 More than \$50 billion

Debtor The North Carolina Theatre _____ Case number (*if known*) _____
 Name _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 23, 2024
 MM / DD / YYYY

X /s/ John A. Zaloom

Signature of authorized representative of debtor

John A. Zaloom

Printed name

Title Chairman of the Board of Directors

18. Signature of attorney

X /s/ Rebecca F. Redwine

Signature of attorney for debtor

Date February 23, 2024

MM / DD / YYYY

Rebecca F. Redwine

Printed name

Hendren, Redwine & Malone, PLLC

Firm name

4600 Marriott Drive

Suite 150

Raleigh, NC 27612

Number, Street, City, State & ZIP Code

Contact phone (919) 420-7867

Email address rredwine@hendrenmalone.com

NC State Bar 37012 NC

Bar number and State

Fill in this information to identify the case:Debtor name The North Carolina TheatreUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

 Check if this is an amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on February 23, 2024X /s/ John A. Zaloom

Signature of individual signing on behalf of debtor

John A. Zaloom

Printed name

Chairman of the Board of Directors

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **The North Carolina Theatre**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known): _____

Check if this is an
amended filing

Official Form 204**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Anna Churchill Synergy Face & Body 8300 Health Park #229 Raleigh, NC 27615						\$100,000.00
Centerplate at Raleigh Convention Attn: Managing Agent 500 S. Salisbury Street Raleigh, NC 27601		Business debt				\$10,508.84
Cornerstone Custom Printing Attn: Managing Agent 149 Claire Drive Clayton, NC 27520		Business debt				\$43,916.92
Debbie Hammersla 8620 Bournemouth Drive Raleigh, NC 27615						\$175,000.00
Enterprise Rent a Car Attn: Managing Agent 4817 Hergrove Rd, Ste 200 Raleigh, NC 27616		Business debt				\$7,098.00
Heritage High School Attn: Managing Agent 110 Corning Road Cary, NC 27518		Business debt				\$8,675.00

Debtor Name	The North Carolina Theatre			Case number (if known)
Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.
				Total claim, if partially secured Deduction for value of collateral or setoff Unsecured claim
iHeartMedia Attn: Managing Agent P.O. Box 406372 Atlanta, GA 30384		Business debt		\$37,170.00
K.D. Kennedy 714 W. Johnson Street Raleigh, NC 27603		Unpaid rent at conservatory		\$21,000.00
Keith & Belinda Shannon 205 Kentigern Drive Raleigh, NC 27606				\$100,000.00
MP Company LLP Attn: Managing Agent 4600 Marriott Drive, Ste 300 Raleigh, NC 27612		Accounting fees		\$25,700.00
MSMT Costume Rentals Attn: Managing Agent 14 Maint Street, Ste 216 Brunswick, ME 04011		Business debt		\$19,000.00
Music Theatre International Attn: Managing Agent 423 West 55 St, 2nd Floor New York, NY 10019		Licensing rights		\$69,521.38
Stancil CPA Attn: Managing Agent 4909 Windy Hill Drive Raleigh, NC 27609		Accounting fees		\$21,750.00
Ticketmaster Attn: Managing Agent 14643 Collections Center Dr Chicago, IL 60693		Business debt		\$38,763.36
Truist Bank Attn: Managing Agent or Officer P.O. Box 1626 Wilson, NC 27894		Blanket Lien		\$300,000.00 \$0.00 \$300,000.00

Debtor Name	The North Carolina Theatre			Case number (if known)
Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.
				Total claim, if partially secured Deduction for value of collateral or setoff Unsecured claim
Truist Bank Attn: Managing Agent or Officer P.O. Box 1626 Wilson, NC 27894		Credit card debt		\$135,000.00
U.S. Small Business Admininatraton Attn: Managing Agent 2 North Street, Suite 320 Birmingham, AL 35203		Blanket Lien		\$150,000.00 \$83,340.00 \$66,660.00
Walter Magazine c/o The Pilot LLC Attn: Managing Agent P.O. Box 58 Southern Pines, NC 28388		Business debt		
WNCN Attn: Managing Agent 33096 Collections Center Dr Chicago, IL 60693		Business debt		
WTVD Attn: Managing Agent 319 Fayetteville Street, Ste 107 Raleigh, NC 27601		Business debt		

Fill in this information to identify the case:

Debtor name The North Carolina Theatre

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Check if this is an amended filing

**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from Schedule A/B..... \$ 0.00

1b. **Total personal property:**

Copy line 91A from Schedule A/B..... \$ 204,912.94

1c. **Total of all property:**

Copy line 92 from Schedule A/B..... \$ 204,912.94

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$ 450,000.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F..... \$ 0.00

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... +\$ 1,673,225.91

4. **Total liabilities**

Lines 2 + 3a + 3b

\$ 2,123,225.91

Fill in this information to identify the case:

Debtor name The North Carolina TheatreUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?** No. Go to Part 2. Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1. Truist Bank	Checking	9902	\$696.12
3.2. Truist Bank	Checking	1669	\$1,169.06
3.3. Truist Bank	Checking	0971	\$97.12
3.4. First Citizens Bank	Checking		\$36,973.24
3.5. Stripe			\$977.40
3.6. First Citizens Bank	Money Market	8653	\$0.00

Debtor The North Carolina Theatre
Name _____Case number (*If known*) _____3.7. First Citizens Bank Donations 1975 \$0.004. **Other cash equivalents** (*Identify all*)5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$39,912.94**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
 Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
 Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

- No. Go to Part 5.
 Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- No. Go to Part 6.
 Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- No. Go to Part 8.
 Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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39. Office furniture
Desks, chairs and other misc. office furniture Unknown N/A \$2,000.0040. **Office fixtures**

Debtor The North Carolina Theatre _____ Case number (*If known*) _____
 Name _____

41. **Office equipment, including all computer equipment and communication systems equipment and software**
Computers Unknown N/A \$5,000.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** \$7,000.00
 Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- No
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- No
 Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- No. Go to Part 9.
 Yes Fill in the information below.

General description <small>Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)</small>	Net book value of debtor's interest <small>(Where available)</small>	Valuation method used for current value	Current value of debtor's interest
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47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. 1995 Chevy Truck (not working) \$0.00 N/A \$500.00

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.** \$500.00
 Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- No
 Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- No
 Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- No. Go to Part 10.
 Yes Fill in the information below.

Debtor The North Carolina Theatre
Name _____Case number (*If known*) _____**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**

- No. Go to Part 11.
 Yes Fill in the information below.

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes Fill in the information below.

	Current value of debtor's interest
71. Notes receivable Description (include name of obligor)	
72. Tax refunds and unused net operating losses (NOLs) Description (for example, federal, state, local)	
73. Interests in insurance policies or annuities	
74. Causes of action against third parties (whether or not a lawsuit has been filed)	
75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims	
76. Trusts, equitable or future interests in property	
77. Other property of any kind not already listed Examples: Season tickets, country club membership Costumes, props, baby grand piano, partitions, light panels, sound equipment and other misc. theatre equipment	\$57,500.00

Potential ARPA grant	\$100,000.00
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78. Total of Part 11. Add lines 71 through 77. Copy the total to line 90.	\$157,500.00
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79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- No
 Yes

Debtor The North Carolina Theatre
Name _____Case number (*If known*) _____**Part 12: Summary****In Part 12 copy all of the totals from the earlier parts of the form**

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$39,912.94</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$7,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$500.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+ \$157,500.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$204,912.94</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$204,912.94</u>

Fill in this information to identify the case:

Debtor name The North Carolina TheatreUnited States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

 Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

	Describe debtor's property that is subject to a lien	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Truist Bank Creditor's Name Attn: Managing Agent or Officer P.O. Box 1626 Wilson, NC 27894 Creditor's mailing address	Blanket Lien	\$300,000.00	\$0.00
Creditor's email address, if known Date debt was incurred 11/22/2022 Last 4 digits of account number	Describe the lien UCC-1 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)	As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.2 U.S. Small Business Administration Creditor's Name Attn: Managing Agent 2 North Street, Suite 320 Birmingham, AL 35203 Creditor's mailing address	Blanket Lien	\$150,000.00	\$83,340.00
Creditor's email address, if known Date debt was incurred 6/18/2020 Last 4 digits of account number	Describe the lien UCC-1 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)		

Debtor Name	The North Carolina Theatre	Case number (if known)
Do multiple creditors have an interest in the same property?		As of the petition filing date, the claim is:
<input checked="" type="checkbox"/> No		Check all that apply
<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.		<input type="checkbox"/> Contingent
		<input type="checkbox"/> Unliquidated
		<input type="checkbox"/> Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$450,000.00**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
U.S. Small Business Administration Attn: Managing Agent P.O. Box 3981 Portland, OR 97208	Line <u>2.2</u>	

Fill in this information to identify the case:

Debtor name **The North Carolina Theatre**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.2 Priority creditor's name and mailing address NC Department of Revenue Attn: Bankruptcy Unit P.O. Box 1168 Raleigh, NC 27602-1168	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre Name	Case number (if known)
2.3	<p>Priority creditor's name and mailing address Wake County Dept. of Revenue Attn: Managing Agent P.O. Box 2331 Raleigh, NC 27602</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: For Notice Purposes Only</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>
		Unknown Unknown

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	<p>Nonpriority creditor's name and mailing address 6AM City, Inc. Attn: Managing Agent P.O. Box 2505 Greenville, SC 29602</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,527.50
3.2	<p>Nonpriority creditor's name and mailing address AI Conyers 1225 Harp St Raleigh, NC 27604-8008</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$392.08
3.3	<p>Nonpriority creditor's name and mailing address Alan Coats 131 Wilma St Angier, NC 27501-9133</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.4	<p>Nonpriority creditor's name and mailing address Alan Lipson 2600 Sunnystone Way Raleigh, NC 27613-7870</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.5	<p>Nonpriority creditor's name and mailing address Alfred Edward Thompson 6141 River Landings Dr Raleigh, NC 27604-6139</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.6	Nonpriority creditor's name and mailing address Alice Dunn 5100 Deer Creek Trl Raleigh, NC 27616-6507	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Allen Kelly 1133 Redford Dr. Raleigh, NC 27603-3587	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Allen Mask 1123 Old Lystra Rd Chapel Hill, NC 27517-9167	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Allison Stafford 413 Hilltop View St Cary, NC 27513-1685	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Alora Burton 657 Lipford Dr Cary, NC 27519	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Amber Garcowski 1421 Falls River Ave Raleigh, NC 27614-7704	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address Amna Cameron 121 Skipwyth Cir Cary, NC 27513-2415	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.13	Nonpriority creditor's name and mailing address Amos Gentry Bullard 171 Springmoor Dr Raleigh, NC 27615-4300	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Amy Deshong 6201 Heacham Ct Raleigh, NC 27614-9236	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address Amy Langdon 10176 NC50 Hwy N Angier, NC 27501-8139	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Amy Langdon 10176 NC50 Hwy N Angier, NC 27501-8139	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Amy Moore 101 Katie Dr Clayton, NC 27520-5509	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Amy Stroud 6000 Sentinel Dr Raleigh, NC 27609-3512	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address Andrea Bosquez Porter 1117 N Blount St Raleigh, NC 27604-1301	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.20	Nonpriority creditor's name and mailing address Andrea Fox 3053 Granville Dr Raleigh, NC 27609-6917	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.21	Nonpriority creditor's name and mailing address Andrew Foshee 85 Sweet Gum Pittsboro, NC 27312-7977	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address Andrew Fried 1420 Fawn Ridge Rd Nw Concord, NC 28027-9066	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address Andy Ammons 8404 Society Pl Raleigh, NC 27615-3190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address Andy Reyes 4004 Iron Horse Rd Raleigh, NC 27616-5057	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address Angela Buffaloe 945 Buffaloe Rd Garner, NC 27529-5186	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address Angela Carroll 1339 Brookhill Dr Clayton, NC 27520-5568	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.27	Nonpriority creditor's name and mailing address Angela Maier 1324 Rodessa Run Raleigh, NC 27607-6011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Angela Maier 1324 Rodessa Run Raleigh, NC 27607-6011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address Anita Wagner 101 Silver Bluff St Holly Springs, NC 27540-9392	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address Ann Benson 12171 Nc 50 Hwy N Willow Spring, NC 27592-8160	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address Ann C. Garrard 210 Presidents Walk Ln Cary, NC 27519-9305	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address Ann Grimes 1501 Peachtree St Goldsboro, NC 27530-3931	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Ann Grimes 1501 Peachtree St Goldsboro, NC 27530-3931	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.34	Nonpriority creditor's name and mailing address Ann Lowe Vodicka 650 Richardson Rd Pittsboro, NC 27312	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.35	Nonpriority creditor's name and mailing address Ann Lowe Vodicka 650 Richardson Rd Pittsboro, NC 27312	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.36	Nonpriority creditor's name and mailing address Ann McKenzie 112 Boldleaf Ct Cary, NC 27513-3812	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.37	Nonpriority creditor's name and mailing address Ann McKenzie 112 Boldleaf Ct Cary, NC 27513-3812	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.38	Nonpriority creditor's name and mailing address Ann Ritter 320 Hillcrest Drive Chocowinity, NC 27817	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.39	Nonpriority creditor's name and mailing address Ann W. Hill 150 Lands End Rd Apt A23 Morehead City, NC 28557-8992	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.40	Nonpriority creditor's name and mailing address Anna Churchill Synergy Face & Body 8300 Health Park #229 Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100,000.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.41	Nonpriority creditor's name and mailing address Anna Moore 2226 Whitman Rd Raleigh, NC 27607-6649	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	Nonpriority creditor's name and mailing address Anne Louise Lord 1014 James Pl Raleigh, NC 27605-1106	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address Anne Morrell 232 Woodstaff Ave. Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address Anne Royster 399 Waverly Hills Dr Cary, NC 27519-9776	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Nonpriority creditor's name and mailing address Annette Barros 1000 Old Mill Creek Ct Raleigh, NC 27614-7199	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address AnnMarie Garza 8306 Mourning Dove Rd Raleigh, NC 27615-3018	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address April Young 1436 Spring Garden Drive Morrisville, NC 27560	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.48	Nonpriority creditor's name and mailing address April Young Blackwell 8612 Stonechase Dr Raleigh, NC 27613-6999	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Atha Price 1407 Knollwood Dr Nw Wilson, NC 27896-1513	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address Atlas Stage Works Attn: Managing Agent 3911 Beryl Road Raleigh, NC 27607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address Aubrey Kerr Walker PO Box 1161 Clayton, NC 27528-1161	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Audrey Garrett 78 Willowcroft Ct Dunn, NC 28334-6278	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Nonpriority creditor's name and mailing address Ayden Lee 812 Cooper Branch Rd Clayton, NC 27520-4362	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	Nonpriority creditor's name and mailing address Barbara E. Trapnell 106 Lomond Ln Cary, NC 27518-9747	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.55	Nonpriority creditor's name and mailing address Barbara Elish 1004 Cuthbert Ln Durham, NC 27703-0289	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	Nonpriority creditor's name and mailing address Barbara Glasgow 801 N Wakefield St Zebulon, NC 27597-2342	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Nonpriority creditor's name and mailing address Barbara Harris 10812 Laurnet Pl Raleigh, NC 27614-8990	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address Barbara Jean 1181 Saint Cloud Loop Apex, NC 27523	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address Barbara Knott 1315 Still Monument Way Raleigh, NC 27603-3493	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Nonpriority creditor's name and mailing address Barbara Marley 120 Spring Hollow Ln Cary, NC 27518-9726	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Nonpriority creditor's name and mailing address Barbara Raess 1164 Saint Cloud Loop Apex, NC 27523-6113	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.62	Nonpriority creditor's name and mailing address Barry Gobble 702 Quarry Street Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address Becky Farmer 2509 Fairview Rd Raleigh, NC 27608-1327	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address Becky Raynor 1808 Greenwood St Elizabethtown, NC 28337-9146	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address Belinda Hiltbruner 1010 Gallop Dr Clayton, NC 27520-8482	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address Ben Parrish 217 Change St. New Bern, NC 28560-4906	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address Beth Brinson 305 Kensington Dr Tarboro, NC 27886-1909	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address Beth Chappell 3712 Jordan Shires Dr New Hill, NC 27562-9334	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.69	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address Beth Dobbie 3550 Horton St Raleigh, NC 27607-3400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address Beth Ryals 5232 Banks Haven Ct Raleigh, NC 27603-8957	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.76	Nonpriority creditor's name and mailing address Betsy Brian Rollins 161 Montrose Dr Durham, NC 27707-3900	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address Betsy Eble 170 T C Justice Rd Pittsboro, NC 27312-7876	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address Betsy J Justice 145 Lake Pine Dr Cary, NC 27511-4377	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address Betsy T. Douglass 7900 Rooksley Ct Raleigh, NC 27615-4712	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address Bettie Long 1298 Bethlehem School Rd Hickory, NC 28601-9379	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.81	Nonpriority creditor's name and mailing address Betty Boyd Hardy 1760 Hasentree Villa Ln Wake Forest, NC 27587-1738	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address Betty Byrum 441 Kings Hollow Dr Raleigh, NC 27603-9469	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.83	Nonpriority creditor's name and mailing address Betty P. Moore 1520 Springmoor Cir Raleigh, NC 27615-5704	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address Beverly Rust 1202 Pine Valley Dr New Bern, NC 28562-2938	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85	Nonpriority creditor's name and mailing address Bill Brewer 8313 Castine Ct Raleigh, NC 27613-4311	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86	Nonpriority creditor's name and mailing address Bill Stokes 906 Wellstone Cir Apex, NC 27502-8532	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address Bill Taylor 3711 Exchange Glenwood Place #220 Raleigh, NC 27612	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address Billie Jo Cockman 1305 Slatestone Ct Raleigh, NC 27615-4382	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89	Nonpriority creditor's name and mailing address Billie Jo Cockman 1305 Slatestone Ct Raleigh, NC 27615-4382	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.90	Nonpriority creditor's name and mailing address Billy Su 1937 Leben St Apex, NC 27502-4418	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address Blanche Nichols 1216 Ferngleen PI Cary, NC 27511-3894	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address Blink Facility Solutions Attn: Managing Agent P.O. Box 91162 Raleigh, NC 27675	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Nonpriority creditor's name and mailing address Bob Brandt 4108 Windsor PI Raleigh, NC 27609-5964	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	Nonpriority creditor's name and mailing address Bob Wrisley 6810 Gloucester Rd Raleigh, NC 27612-2432	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	Nonpriority creditor's name and mailing address Bobbie W. Furr 708 Dartmouth Rd Raleigh, NC 27609-5942	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.96	Nonpriority creditor's name and mailing address Bonnie Latham 4603 Yadkin Dr Raleigh, NC 27609-5570	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.97	Nonpriority creditor's name and mailing address Bonnie Medinger 701 Brookfield Rd Raleigh, NC 27615-1408	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address Bonnie Mulfinger 501 Redhill Rd Holly Springs, NC 27540-6282	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address Bonnie Stem 11625 Midlavian Dr. Raleigh, NC 27614	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	Nonpriority creditor's name and mailing address Bonnie Wolf 3900 Westwood Pl Raleigh, NC 27613-1563	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.101	Nonpriority creditor's name and mailing address Boyd Wilson 1109 Fernrlen Pl Cary, NC 27511	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102	Nonpriority creditor's name and mailing address Brandie Beebe 3936 Wendell Blvd Wendell, NC 27591-6940	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103	Nonpriority creditor's name and mailing address Brandie Littlefield 210 West Wyatts Pond Ln. Cary, NC 27513	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.104	Nonpriority creditor's name and mailing address Brant T. Massey 822 Knight Dr Durham, NC 27712-1306	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.105	Nonpriority creditor's name and mailing address Brenda Woodley 2301 Riley Rd Kinston, NC 28504-1439	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.106	Nonpriority creditor's name and mailing address Brenda Wright 105 Student Pl Durham, NC 27713-6067	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.107	Nonpriority creditor's name and mailing address Brian Belvin 8805 Zeigler Dr Knightdale, NC 27545-7468	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.108	Nonpriority creditor's name and mailing address Brian Field 5508 Hunter Hollow Dr Raleigh, NC 27606-9371	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.109	Nonpriority creditor's name and mailing address Bridgette Williamson 43 Barnes St Greenville, NC 27858-6102	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.110	Nonpriority creditor's name and mailing address Bruce Hudson PO Box 108 Falcon, NC 28342-0108	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.111	Nonpriority creditor's name and mailing address Bruce Reed 1108 Coram Fields Rd Wake Forest, NC 27587-5186	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address Bruce Tompkins 8305 WYCOMBE RIDGE WAY WAKE FOREST, NC 27587-5415	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address Bryan Latham 8009 Windsor Way Elon, NC 27244-9411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address Bryan Mercer 4805 Tannenhill Trl Holly Springs, NC 27540-9204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115	Nonpriority creditor's name and mailing address Bryant Woodall 6440 Camellia Creek Dr Raleigh, NC 27603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.116	Nonpriority creditor's name and mailing address Camille Mceachren PO Box 27 Vanceboro, NC 28586-0027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address Candace MacNaughton 6905 Mere View Ct Raleigh, NC 27606-9023	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.118	Nonpriority creditor's name and mailing address Carl Dawson 5605 Maram Ct Raleigh, NC 27609-3870	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address Carl Worstell 229 Curragh Cove Fuquay Varina, NC 27526-8798	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address Carla Frederick 4301 Ilyar Way Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.121	Nonpriority creditor's name and mailing address Carlene McIntyre 1255 Davis Rd Garland, NC 28441-9083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address Carlton Heating & Air Attn: Managing Agent 6622 Old Wake Forest Road Raleigh, NC 27616	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address Carol Ellis 1823 Stage Road Durham, NC 27703	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address Carol Fussell 828 Swan Neck Ln Raleigh, NC 27615-3764	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.125	Nonpriority creditor's name and mailing address Carol Hagy 6112 Chatford Dr Raleigh, NC 27612-6252	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.126	Nonpriority creditor's name and mailing address Carol Hagy 6112 Chatford Dr Raleigh, NC 27612-6252	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.127	Nonpriority creditor's name and mailing address Carol Huckle 650 Cedar Point Blvd Cedar Point, NC 28584	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.128	Nonpriority creditor's name and mailing address Carol Kump 133 Dry Gully Ct Wake Forest, NC 27587-1813	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.129	Nonpriority creditor's name and mailing address Carol Kump 133 Dry Gully Ct Wake Forest, NC 27587-1813	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$689.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.130	Nonpriority creditor's name and mailing address Carol Neri 308 Bordeaux Ln. Cary, NC 27511-6467	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.131	Nonpriority creditor's name and mailing address Carol Randall 227 Beckingham Loop Cary, NC 27519-6374	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.132	Nonpriority creditor's name and mailing address Carol Sanchez 200 Woodstaff Ave Wake Forest, NC 27587-9802	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.133	Nonpriority creditor's name and mailing address Carol Walker 7011 Pine Hill Rd Durham, NC 27707-9574	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.134	Nonpriority creditor's name and mailing address Carole Guld 3415 Sir Colleton Ct Raleigh, NC 27612-4186	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.135	Nonpriority creditor's name and mailing address Carole Wagner 3413 Ebenezer Church Rd Raleigh, NC 27612-4117	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$588.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.136	Nonpriority creditor's name and mailing address Caroline Taylor 1121 Parkridge Ln Apt 109 Raleigh, NC 27605-3224	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.137	Nonpriority creditor's name and mailing address Carolyn Ambrose 412 Creek Rd Bath, NC 27808-9359	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.138	Nonpriority creditor's name and mailing address Carolyn Peebles 3106 Venus Dr Raleigh, NC 27604-4115	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.139	Nonpriority creditor's name and mailing address Carolyn S. Leith 6005 Castlebrook Dr Raleigh, NC 27604-5927	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.140	Nonpriority creditor's name and mailing address Catherine Daubert 807 Carpenter Town Ln Cary, NC 27519	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,074.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.141	Nonpriority creditor's name and mailing address Catherine Grayson 245 NE 69th St. Oak Island, NC 28465	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.142	Nonpriority creditor's name and mailing address Catherine Grayson 245 NE 69th St. Oak Island, NC 28465	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.143	Nonpriority creditor's name and mailing address Catherine Ormsby 293 Godfrey Branch Rd Swansboro, NC 28584-8185	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.144	Nonpriority creditor's name and mailing address Catherine Smith 204 Merwin Rd. Raleigh, NC 27606-2635	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$882.18
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.145	Nonpriority creditor's name and mailing address Cathleen Plaut 8628 Reindeer Moss Dr Wake Forest, NC 27587-4836	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.146	Nonpriority creditor's name and mailing address Cathryn Parsons 817 Lake Royale Louisburg, NC 27549	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.147	Nonpriority creditor's name and mailing address Cathy Pratt 4600 Crabtree Pines Ln Raleigh, NC 27612-3953	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.148	Nonpriority creditor's name and mailing address Celito Communications, LLC Attn: Managing Agent P.O. Box 37129 Raleigh, NC 27627	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,573.01
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Business debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.149	Nonpriority creditor's name and mailing address Centerplate at Raleigh Convention Attn: Managing Agent 500 S. Salisbury Street Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,508.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Business debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.150	Nonpriority creditor's name and mailing address Chanda Branch 2112 Lake Trout Ln Raleigh, NC 27610-5563	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.151	Nonpriority creditor's name and mailing address Chante Thompson 309 Holtz Ln Cary, NC 27511-3509	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$980.20
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.152	Nonpriority creditor's name and mailing address Charles P. Wilkins 2111 Fairview Rd Raleigh, NC 27608-2234	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.153	Nonpriority creditor's name and mailing address Charles P. Wilkins 2111 Fairview Rd Raleigh, NC 27608-2234	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.154	Nonpriority creditor's name and mailing address Charles P. Wilkins 2111 Fairview Rd Raleigh, NC 27608-2234	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.155	Nonpriority creditor's name and mailing address Charles P. Wilkins 2111 Fairview Rd Raleigh, NC 27608-2234	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.156	Nonpriority creditor's name and mailing address Charles W. Stuber 1800 Manuel St Raleigh, NC 27612-5510	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.157	Nonpriority creditor's name and mailing address Charlie Mann 102 Bronzewood Ct Cary, NC 27518-8637	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.158	Nonpriority creditor's name and mailing address Cheryl Difiore 729 Bennington Dr Raleigh, NC 27615-1202	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.159	Nonpriority creditor's name and mailing address Cheryl Theriault 424 Emerson Dr. Raleigh, NC 27609	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.160	Nonpriority creditor's name and mailing address Cheryle Prater 1617 Adonis Blue Way Fuquay Varina, NC 27526	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address Cheryle Prater 1617 Adonis Blue Way Fuquay Varina, NC 27526	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Chris Hicks PO Box 93 Timberlake, NC 27583-0093	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Chris Hrnicek 110 Balzac Ct Cary, NC 27511-6398	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address Chris Seamster 6304 Godfrey Drive Raleigh, NC 27612	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Christene Bellopatrick 2216 Stonerose Cir Raleigh, NC 27606-8706	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.166	Nonpriority creditor's name and mailing address Christine Higgins 109 Presley Snow Ct Holly Springs, NC 27540-4710	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.167	Nonpriority creditor's name and mailing address Christine L. Andrade 7504 Pats Branch Dr Raleigh, NC 27612-7319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168	Nonpriority creditor's name and mailing address Christine Lawless 112 Estes Drive Ext Apt A Carrollton, NC 27510-1472	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.169	Nonpriority creditor's name and mailing address Christine Stilley 301 Fayetteville Street Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.170	Nonpriority creditor's name and mailing address Christopher Coughlin 803 Holt Dr Raleigh, NC 27608-2333	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.171	Nonpriority creditor's name and mailing address Christopher Leazer 3208 Signature Ln Raleigh, NC 27606-4500	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.172	Nonpriority creditor's name and mailing address Cindy Ballenger 440 Center Court Dr. Boone, NC 28607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.173	Nonpriority creditor's name and mailing address Cindy Ballenger 440 Center Court Dr. Boone, NC 28607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.174	<p>Nonpriority creditor's name and mailing address Cintas Attn: Managing Agent P.O. Box 63102 Cincinnati, OH 45263</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,849.53
3.175	<p>Nonpriority creditor's name and mailing address City of Raleigh Attn: Managing Agent One Exchange Plaza, 10th Floor Raleigh, NC 27601</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,230.00
3.176	<p>Nonpriority creditor's name and mailing address Claire See 1712 Hunting Ridge Rd Raleigh, NC 27615-7029</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52
3.177	<p>Nonpriority creditor's name and mailing address Clara L. Hager 1211 Santa Cruz St Wake Forest, NC 27587-7204</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$392.08
3.178	<p>Nonpriority creditor's name and mailing address Clara L. Hager 1211 Santa Cruz St Wake Forest, NC 27587-7204</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.179	<p>Nonpriority creditor's name and mailing address Claudia N. Curtis 2207 Wilshire Dr Durham, NC 27707-2245</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.180	<p>Nonpriority creditor's name and mailing address Claudia N. Curtis 2207 Wilshire Dr Durham, NC 27707-2245</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.181	Nonpriority creditor's name and mailing address Clean Advertising & Design Attn: Managing Agent 806 McCulloch St, Ste 102 Raleigh, NC 27603 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$6,230.00
3.182	Nonpriority creditor's name and mailing address Clif Bullard PO Box 98775 Raleigh, NC 27624 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.183	Nonpriority creditor's name and mailing address Cliff Benson III 212 Drummond Dr Raleigh, NC 27609-7003 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,105.12
3.184	Nonpriority creditor's name and mailing address COL (RET) Griffin Lockett 597 Mill Creek Church Rd Four Oaks, NC 27524-8029 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.185	Nonpriority creditor's name and mailing address Connie Liles 1314 Pineview Dr Garner, NC 27529-4150 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$414.42
3.186	Nonpriority creditor's name and mailing address Connie Liles 1314 Pineview Dr Garner, NC 27529-4150 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$414.42
3.187	Nonpriority creditor's name and mailing address Cornterstone Custom Printing Attn: Managing Agent 149 Claire Drive Clayton, NC 27520 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$43,916.92

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.188	Nonpriority creditor's name and mailing address Cort DeVoe 1019 Steinbeck Dr Durham, NC 27703-6496	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.189	Nonpriority creditor's name and mailing address Courtney S. Penland 2608 Bloomsberry Ridge Dr Fuquay Varina, NC 27526-7291	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.190	Nonpriority creditor's name and mailing address Courtney Tellefsen 1209 Indian Trail Dr Raleigh, NC 27609-5439	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.191	Nonpriority creditor's name and mailing address Craig Anderson 3541 Sugarplum Rd Raleigh, NC 27604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.192	Nonpriority creditor's name and mailing address Craig Fortner 3512 Foy Glen Ct Apex, NC 27539-3682	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.193	Nonpriority creditor's name and mailing address Custom Engraving & Trophy Attn: Managing Agent 612 North Person Street Raleigh, NC 27604	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.194	Nonpriority creditor's name and mailing address Customer Friends of Integrated Design, P 2500 Dawson Mill Run Raleigh, NC 27606	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.195	Nonpriority creditor's name and mailing address Cynthia Coffey 239 Lafferty St Durham, NC 27703-0740	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.196	Nonpriority creditor's name and mailing address Cynthia G. Smith 925 Ravendale Pl Cary, NC 27513-4297	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.197	Nonpriority creditor's name and mailing address Cynthia Johnson 2501 Cleveland Rd Smithfield, NC 27577-8286	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$777.96
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.198	Nonpriority creditor's name and mailing address Cynthia Johnson 2501 Cleveland Rd Smithfield, NC 27577-8286	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.199	Nonpriority creditor's name and mailing address D. Glenn Pierce 5300 Ten Ten Rd Apex, NC 27539-8346	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,105.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.200	Nonpriority creditor's name and mailing address Dan Bryson 5744 Heatherstone Dr Raleigh, NC 27606-9342	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.201	Nonpriority creditor's name and mailing address Dan Wilson 4804 Latimer Rd Raleigh, NC 27609-5363	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.202	Nonpriority creditor's name and mailing address Daniel Fuhrman 2644 Ridgewell Ct Raleigh, NC 27613-1660	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.203	Nonpriority creditor's name and mailing address Daniel L. Thomas 3808 Banstead Ct Apex, NC 27539-9111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.204	Nonpriority creditor's name and mailing address Daniel Palmieri 411 Palace Green Cary, NC 27518-8411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.205	Nonpriority creditor's name and mailing address Danielle Ward 2352 Noble Rd Raleigh, NC 27608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.206	Nonpriority creditor's name and mailing address Darra Samosky 1421 Upchurch Woods Dr Raleigh, NC 27603-8019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.207	Nonpriority creditor's name and mailing address David Barkhau 7004 Spring Ridge Rd Cary, NC 27518-9020	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.208	Nonpriority creditor's name and mailing address David C. Herring 4338 Frink School Rd La Grange, NC 28551-8304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.209	Nonpriority creditor's name and mailing address David C. Herring 4338 Frink School Rd La Grange, NC 28551-8304	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210	Nonpriority creditor's name and mailing address David Creech 3816 Yadkin Dr Raleigh, NC 27609-6329	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.211	Nonpriority creditor's name and mailing address David DeFoor 109 Perdue St Garner, NC 27529-3021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.212	Nonpriority creditor's name and mailing address David DeFoor 109 Perdue St Garner, NC 27529-3021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.213	Nonpriority creditor's name and mailing address David Dyer 106 Lively Ct W Cary, NC 27511-5785	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.214	Nonpriority creditor's name and mailing address David G Eckard 76 Hadley Ln Clayton, NC 27527-7026	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.215	Nonpriority creditor's name and mailing address David Geiss 5617 Turner Glen Drive Raleigh, NC 27603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.216	Nonpriority creditor's name and mailing address David Heuser 8300 Clarks Branch Dr Raleigh, NC 27613-6977	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217	Nonpriority creditor's name and mailing address David Hill 109 Sumpter Dr Goldsboro, NC 27534-2355	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218	Nonpriority creditor's name and mailing address David Hirschel 32 Linden St Waterbury, CT 06702-1301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219	Nonpriority creditor's name and mailing address David Krum 1012 Meadowbrook Dr Garner, NC 27529-2826	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220	Nonpriority creditor's name and mailing address David Oates 623 Doddington Dr Rolesville, NC 27571-9701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.221	Nonpriority creditor's name and mailing address David Paul Adams M.D. 115 Kildaire Park Dr Ste 301 Cary, NC 27518-8144	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.222	Nonpriority creditor's name and mailing address David Smith 2201 Lodestar Dr Raleigh, NC 27615-2524	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.223	Nonpriority creditor's name and mailing address David Wall 1304 Silent Brook Rd Wake Forest, NC 27587-5501	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.224	Nonpriority creditor's name and mailing address David Wylly 108 N Virginia St Goldsboro, NC 27530	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$537.34
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.225	Nonpriority creditor's name and mailing address Dawn Pappas 1012 Prairie Smoke St Wake Forest, NC 27587-3853	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.226	Nonpriority creditor's name and mailing address Dayna Portis 67 Ashley Woods Ct. Clayton, NC 27527	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.227	Nonpriority creditor's name and mailing address Debbie Hammersla 8620 Bournemouth Drive Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$175,000.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.228	Nonpriority creditor's name and mailing address Debbie Hammersla 8620 Bournemouth Dr Raleigh, NC 27615-2008	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.229	Nonpriority creditor's name and mailing address Debbie Hammersla 8620 Bournemouth Dr Raleigh, NC 27615-2008	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.230	Nonpriority creditor's name and mailing address Debbie Schulz 505 Spruce Hollow Dr Fuquay Varina, NC 27526-8188	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$828.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.231	Nonpriority creditor's name and mailing address Debbie Woody 1416 Dellwood Dr Raleigh, NC 27607-6717	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.232	Nonpriority creditor's name and mailing address Deborah Brown 1344 Regulator St Raleigh, NC 27603-3495	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.233	Nonpriority creditor's name and mailing address Deborah Crooke 301 Homegate Cir Apex, NC 27502-3987	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.234	Nonpriority creditor's name and mailing address Deborah Cross PO Box 1187 Garner, NC 27529-1187	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.235	Nonpriority creditor's name and mailing address Deborah Koenig PO Box 2097 Fayetteville, NC 28302-2097	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.236	Nonpriority creditor's name and mailing address Deborah Lewis 4304 Long Branch Trl Raleigh, NC 27604-5950	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.237	Nonpriority creditor's name and mailing address Deborah Orol 10104 Bushveld Ln Raleigh, NC 27613-6146	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.238	Nonpriority creditor's name and mailing address Deborah Stockdale 13332 Ashford Park Dr Raleigh, NC 27613-4149	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$588.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.239	Nonpriority creditor's name and mailing address Deborah Tippett 2701 Tickett Rd Durham, NC 27705	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.240	Nonpriority creditor's name and mailing address Debra Buchanan 511 Florence St Raleigh, NC 27603-2143	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.241	Nonpriority creditor's name and mailing address Debra Dunn 217 Sailfish Ct Durham, NC 27703-8373	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.242	Nonpriority creditor's name and mailing address Debra McLamb 5432 Den Heider Way Raleigh, NC 27606-9583	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.243	Nonpriority creditor's name and mailing address Debra McLamb 5432 Den Heider Way Raleigh, NC 27606-9583	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.244	Nonpriority creditor's name and mailing address Debra McLamb 5432 Den Heider Way Raleigh, NC 27606-9583	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.245	Nonpriority creditor's name and mailing address Debra Pylypiw PO Box 1821 Swansboro, NC 28584-1821	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$518.64
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.246	Nonpriority creditor's name and mailing address Deena Gilliam 204 Maumee Ct Cary, NC 27513	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$438.68
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.247	Nonpriority creditor's name and mailing address Deirdre Jersey 829 Shadow Lake Dr Willow Spring, NC 27592-9139	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.248	Nonpriority creditor's name and mailing address Delores Parker 6408 Gainsborough Dr Raleigh, NC 27612-6617	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.249	Nonpriority creditor's name and mailing address Denee Oakley 3605 Laurel Hills Rd Raleigh, NC 27612-4206	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.250	Nonpriority creditor's name and mailing address Denise Olson 7 Pascal Way Durham, NC 27705-4924	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.251	Nonpriority creditor's name and mailing address Denise Rowe 1417 Big Falls Dr Wendell, NC 27591	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.252	Nonpriority creditor's name and mailing address Denise Williams 188 Mallie Pearce Rd Zebulon, NC 27597-6018	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.253	Nonpriority creditor's name and mailing address Denise Wynn 601 Mallory Lane Morrisville, NC 27713	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.254	Nonpriority creditor's name and mailing address Dennis Cole 384 Bess Dr Clayton, NC 27520-4092	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.255	Nonpriority creditor's name and mailing address Derreth Kavanagh 108 Barons Glenn Way Cary, NC 27513-1781	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.256	Nonpriority creditor's name and mailing address Diane Hucke 10516 Leafwood PI Raleigh, NC 27613-6306	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.257	Nonpriority creditor's name and mailing address Dianna Knight 211 Forest Oaks Dr Clayton, NC 27527-5730	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.258	Nonpriority creditor's name and mailing address Dianne Downing 1960 Hornbeck Ct Raleigh, NC 27614-7048	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.259	Nonpriority creditor's name and mailing address Disney Theatrical Group Attn: Managing Agent 500 S. Buena Vista Street Burbank, CA 91521	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.260	Nonpriority creditor's name and mailing address Don Davis 1305 Downhill Slide Trl. Raleigh, NC 27614-8231	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.261	Nonpriority creditor's name and mailing address Don Davis 1305 Downhill Slide Trl. Raleigh, NC 27614-8231	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.262	Nonpriority creditor's name and mailing address Don Haire 79 Kylemore Pl Clayton, NC 27520-1762	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.263	Nonpriority creditor's name and mailing address Don Harris 156 Shirley Dr Cary, NC 27511-3852	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.264	Nonpriority creditor's name and mailing address Don Stroud PO Box 1109 Wake Forest, NC 27588-1109	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.265	Nonpriority creditor's name and mailing address Don Stroud PO Box 1109 Wake Forest, NC 27588-1109	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.266	Nonpriority creditor's name and mailing address Donald Fraley 6804 Greystone Dr Raleigh, NC 27615-7407	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.267	Nonpriority creditor's name and mailing address Donna Gardner 5413 West Oaks Dr Fuquay Varina, NC 27526-9477	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.268	Nonpriority creditor's name and mailing address Donnie Bunn 500 Carnoustie Dr Greenville, NC 27858-8131	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$588.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.269	Nonpriority creditor's name and mailing address Dorothy Jennings 217 Lake Tillery Dr Cary, NC 27519-9518	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.270	Nonpriority creditor's name and mailing address Dorothy Schmelzeis 202 Glasgow Rd Cary, NC 27511-6518	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.271	Nonpriority creditor's name and mailing address Doug Grissom 6104 Ellis Dr Raleigh, NC 27612-1826	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.272	Nonpriority creditor's name and mailing address Doug Sutton 5236 Knollwood Rd Raleigh, NC 27609-4512	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.273	Nonpriority creditor's name and mailing address Douglas Ball 1401 Aversboro Rd Ste 206 Garner, NC 27529-3980	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.274	Nonpriority creditor's name and mailing address Douglas E. Lam 242 Luss Lane Southern Pines, NC 28387	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.275	Nonpriority creditor's name and mailing address Douglas Hammer 1207 Watauga St Raleigh, NC 27604-2035	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.276	Nonpriority creditor's name and mailing address Douglas Hammer 1207 Watauga St Raleigh, NC 27604-2035	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.277	Nonpriority creditor's name and mailing address Drew Wirtz 307 W Franklin St Enfield, NC 27823-1320	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.278	Nonpriority creditor's name and mailing address Duane Dorsay 4801 Westgreen Ct Raleigh, NC 27612-3584	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.279	Nonpriority creditor's name and mailing address Dyanne Miller 1116 Fairway Villas Dr Wake Forest, NC 27587-5179	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.280	Nonpriority creditor's name and mailing address E.D. Briggs Attn: Managing Agent P.O. Box 1188 Fuquay Varina, NC 27526	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$187.69
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Business debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.281	Nonpriority creditor's name and mailing address Easter Maynard 621 Transylvania Ave Raleigh, NC 27609	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.282	Nonpriority creditor's name and mailing address Ed Moore PO Box 20867 Raleigh, NC 27619-0867	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$587.30
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.283	Nonpriority creditor's name and mailing address Ed Tucker 5304 Amsterdam Pl Raleigh, NC 27606-9706	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.284	Nonpriority creditor's name and mailing address Edie Webb 121 Lake Boone Tr. Raleigh, NC 27608	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.285	Nonpriority creditor's name and mailing address Edward Gainor 5609 Farmridge Road Raleigh, NC 27617	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$414.42
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.286	Nonpriority creditor's name and mailing address Edward Hillings 620 Wade Ave. Unit 502 Raleigh, NC 27605	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.287	Nonpriority creditor's name and mailing address Edward Wase 6000 Glenview Garden Place Cary, NC 27511	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.35
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.288	Nonpriority creditor's name and mailing address Edythe Poyner 2701 Glenwood Gardens Ln #303 Raleigh, NC 27608	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$726.26
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.289	Nonpriority creditor's name and mailing address Eileen Davison 7031 Drewry Virginia Line Rd Manson, NC 27553-9138	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$980.20
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.290	Nonpriority creditor's name and mailing address Eileen Davison 7031 Drewry Virginia Line Rd Manson, NC 27553-9138	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,372.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.291	Nonpriority creditor's name and mailing address Eileen Gunther 10504 Tree Bark Ct. Raleigh, NC 27613-6313	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.292	Nonpriority creditor's name and mailing address Elaine J. Craig 4106 Princess Anne Cir N Wilson, NC 27896-8933	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.293	Nonpriority creditor's name and mailing address Elaine Nisbet 1100 Vestavia Woods Dr Raleigh, NC 27615-4612	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.294	Nonpriority creditor's name and mailing address Elaine Wilson 1721 Tiffany Bay Ct Unit 301 Raleigh, NC 27609-5088	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.295	Nonpriority creditor's name and mailing address Eleanor Jones 4 Wynmore Dr Durham, NC 27713	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.296	Nonpriority creditor's name and mailing address Elisabeth Selig 2032 Monthaven Dr Wake Forest, NC 27587-6548	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.297	Nonpriority creditor's name and mailing address Elizabeth Almasy 5816 Shamrock Rd Durham, NC 27713-2630	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$215.39
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.298	Nonpriority creditor's name and mailing address Elizabeth Berry 4501 Revere Dr Raleigh, NC 27609-5247	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.299	Nonpriority creditor's name and mailing address Elizabeth Berry 4501 Revere Dr Raleigh, NC 27609-5247	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.300	Nonpriority creditor's name and mailing address Elizabeth Cozart 303 Hudson St Raleigh, NC 27608-1608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.301	Nonpriority creditor's name and mailing address Elizabeth Sager 1722 Carl Williamson Rd Raleigh, NC 27610-9774	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.302	Nonpriority creditor's name and mailing address Elizabeth White 751 Peakland PI Raleigh, NC 27604-3085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.303	Nonpriority creditor's name and mailing address Elizabeth Zucker 11212 Brass Kettle Rd Raleigh, NC 27614-8443	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.304	Nonpriority creditor's name and mailing address Ella Colborn 3812 Langley Dr Durham, NC 27705-1843	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.305	Nonpriority creditor's name and mailing address Ellen Blair 7808 Senter Farm Rd Apex, NC 27539-9788	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.306	Nonpriority creditor's name and mailing address Eloise Sheats 4701 Joseph Michael Ct Raleigh, NC 27606-9647	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.307	Nonpriority creditor's name and mailing address Emad Khatib 3929 Sunridge Rd Raleigh, NC 27613	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.308	Nonpriority creditor's name and mailing address Enterprise Rent a Car Attn: Managing Agent 4817 Hergrove Rd, Ste 200 Raleigh, NC 27616	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,098.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Business debt		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.309	Nonpriority creditor's name and mailing address Eric Jensen 108 Oxford Creek Rd Cary, NC 27519-9756	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,383.04
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.310	Nonpriority creditor's name and mailing address Erica Grantmyre 1308 Bloomingdale Dr Cary, NC 27511-5933	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.311	Nonpriority creditor's name and mailing address Erica Grantmyre 1308 Bloomingdale Dr Cary, NC 27511-5933	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.312	Nonpriority creditor's name and mailing address Erika Rosenthal 2524 Tuscany Woods Ct Raleigh, NC 27612-2939	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.313	Nonpriority creditor's name and mailing address Erin Marshall 1609 Keyworth Ct Raleigh, NC 27612	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.314	Nonpriority creditor's name and mailing address Erin Marshall 1609 Keyworth Ct Raleigh, NC 27612	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.315	Nonpriority creditor's name and mailing address Eura Gaskins 612 Lakestone Dr Raleigh, NC 27609-6340	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.316	Nonpriority creditor's name and mailing address Fabio F. De Contreras 1521 Poets Glade Dr Apex, NC 27523-6251	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.317	Nonpriority creditor's name and mailing address Faye Watkins 613 Old Farm Rd Raleigh, NC 27606-2245	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.318	Nonpriority creditor's name and mailing address Fedex Attn: Managing Agent 3965 Airway, Module G Memphis, TN 38116	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.319	Nonpriority creditor's name and mailing address Floyd Cook 103 Ripley Ct Cary, NC 27513-5121	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.320	Nonpriority creditor's name and mailing address Fran Melia 111 Fallsworth Dr Cary, NC 27513-5102	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.321	<p>Nonpriority creditor's name and mailing address Fran Rudick 1500 River Mill Dr Apt 203 Wake Forest, NC 27587-6275</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.322	<p>Nonpriority creditor's name and mailing address Frances Bobbie 4933 Cremshaw Ct Raleigh, NC 27614-8322</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.323	<p>Nonpriority creditor's name and mailing address Frances Turner 5017 Clowser Minnow Ct Wake Forest, NC 27587</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.324	<p>Nonpriority creditor's name and mailing address Frances Turner 5017 Clowser Minnow Ct Wake Forest, NC 27587</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.325	<p>Nonpriority creditor's name and mailing address Frances Turner 5017 Clowser Minnow Ct Wake Forest, NC 27587</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.326	<p>Nonpriority creditor's name and mailing address Francis "Frank" Werner 26 Kollinova Dr Clayton, NC 27527-4271</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.327	<p>Nonpriority creditor's name and mailing address Frederick Cubbage 1025 Kingsway Dr Apex, NC 27502-8946</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.328	Nonpriority creditor's name and mailing address Gail Duncan 204 Glasgow Rd Cary, NC 27511-6518	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.329	Nonpriority creditor's name and mailing address Gail Duncan 204 Glasgow Rd Cary, NC 27511-6518	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.330	Nonpriority creditor's name and mailing address Gail Willard 704 Runnymede Rd Raleigh, NC 27607-3104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.331	Nonpriority creditor's name and mailing address Gary Bowman 3342 Lake Boone Trl Raleigh, NC 27607-6748	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.332	Nonpriority creditor's name and mailing address Gary Travis 3904 Capital Blvd Raleigh, NC 27604-3412	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.333	Nonpriority creditor's name and mailing address Genia Tyson Bone 3509 S Meade Pl Nw Wilson, NC 27896-9611	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.334	Nonpriority creditor's name and mailing address Geoff Grisso PO Box 1419 Washington, NC 27889-1419	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.335	Nonpriority creditor's name and mailing address George Betts 2140 Castle Pines Dr Raleigh, NC 27604-5440	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.336	Nonpriority creditor's name and mailing address George Budd 8445 Secreto Dr Raleigh, NC 27606-0031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.337	Nonpriority creditor's name and mailing address George DeLoache 504 Chesterfield Rd Raleigh, NC 27608-1016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.338	Nonpriority creditor's name and mailing address Georgia Meckes 1765 Town Home Dr Apex, NC 27502	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.339	Nonpriority creditor's name and mailing address Gerald Haegle 5317 Bent Leaf Dr Raleigh, NC 27606-9085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.340	Nonpriority creditor's name and mailing address Gerald McLaughlin 232 Shillings Chase Dr Cary, NC 27518-6483	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.341	Nonpriority creditor's name and mailing address GFL Environmental Attn: Managing Agent P.O. Box 791519 Baltimore, MD 21279	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.342	Nonpriority creditor's name and mailing address Gil Wood 10609 Charlesgate Ct Raleigh, NC 27614-6509	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.343	Nonpriority creditor's name and mailing address Ginger Rice 2720 Lautenberg Ln Willow Spring, NC 27592-8634	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.344	Nonpriority creditor's name and mailing address Glen Wall 555 Zachary Way Garner, NC 27529-8194	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.345	Nonpriority creditor's name and mailing address Glenda Adams 1900 Partridge Berry Dr Raleigh, NC 27606-9400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.346	Nonpriority creditor's name and mailing address Glenda Adams 1900 Partridge Berry Dr Raleigh, NC 27606-9400	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.347	Nonpriority creditor's name and mailing address Glenn Kort 411 Heralds Way Cary, NC 27519-6493	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.348	Nonpriority creditor's name and mailing address Gloria Davis 728 Lakestone Dr Raleigh, NC 27609-6342	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	
	Last 4 digits of account number _____	Basis for the claim: <u>Ticket refund claim</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.349	Nonpriority creditor's name and mailing address Gloria Drolet 116 Dancing Shoes Ct Clayton, NC 27520-4340	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$229.92
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.350	Nonpriority creditor's name and mailing address Gloria Pleasant 925 Mulberry Rd Clayton, NC 27520-2129	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.351	Nonpriority creditor's name and mailing address Gordon Brown 302 Nine Gates Rd. Chapel Hill, NC 27516-5548	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.352	Nonpriority creditor's name and mailing address Gordon Miller 1006 Lake Path Rd Willow Spring, NC 27592-9136	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.353	Nonpriority creditor's name and mailing address Grace Ramsey 1832 Old Milburnie Rd Raleigh, NC 27604-9638	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.354	Nonpriority creditor's name and mailing address Grace Ramsey 1832 Old Milburnie Rd Raleigh, NC 27604-9638	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.355	Nonpriority creditor's name and mailing address Greg Stenzel 1400 Kings Lassiter Way Raleigh, NC 27614-8736	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$259.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.356	Nonpriority creditor's name and mailing address Greg Stenzel 1400 Kings Lassiter Way Raleigh, NC 27614-8736	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$518.64
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.357	Nonpriority creditor's name and mailing address Greg Stenzel 1400 Kings Lassiter Way Raleigh, NC 27614-8736	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$259.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.358	Nonpriority creditor's name and mailing address Gregory Keller 7741 Cullingtree Ln Wake Forest, NC 27587-9624	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.359	Nonpriority creditor's name and mailing address Gregory Mayes 912 Havens Edge Ct. Apex, NC 27523	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.360	Nonpriority creditor's name and mailing address Gwen Harris 7343 Sweet Bay Ln Raleigh, NC 27615-6225	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.361	Nonpriority creditor's name and mailing address Hailey Hennessy 7000 Regency Parkway Cary, NC 27518	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.362	Nonpriority creditor's name and mailing address Harold Bardill 179 Egret Pt Lexington, NC 27292	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$588.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.363	Nonpriority creditor's name and mailing address Harold Hingley III 404 Rice Ln Havelock, NC 28532-1740	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.364	Nonpriority creditor's name and mailing address Harry Albert 105 Gatestone Ct Cary, NC 27518-7803	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.365	Nonpriority creditor's name and mailing address Heather Kent 7604 Coppersmith Ct. Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.366	Nonpriority creditor's name and mailing address Heather M. Monroe 2211 Yorkgate Dr Raleigh, NC 27612	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.367	Nonpriority creditor's name and mailing address Hector Magante 1401 Coopershill Dr Apt 308 Raleigh, NC 27604-4527	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.368	Nonpriority creditor's name and mailing address Helen DiPietro 1137 Shadyside Dr Raleigh, NC 27612-2402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.369	Nonpriority creditor's name and mailing address Helen Vick 200 Hawkesburg Dr Clayton, NC 27527-8343	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.370	Nonpriority creditor's name and mailing address Heritage High School Attn: Managing Agent 110 Corning Road Cary, NC 27518 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Business debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,675.00
3.371	Nonpriority creditor's name and mailing address Hilda Zimmer 700 Buffaloe Rd Garner, NC 27529-5125 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$588.12
3.372	Nonpriority creditor's name and mailing address Holly Carroll 2989 Club Dr Raleigh, NC 27613-1277 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.373	Nonpriority creditor's name and mailing address Howard Kaufman 1310 Queensferry Rd Cary, NC 27511-6568 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$864.40
3.374	Nonpriority creditor's name and mailing address Howard Margulies 8821 Leeshire Ln Raleigh, NC 27615-6568 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.375	Nonpriority creditor's name and mailing address Huldah Lindsey 105 New Faison Ln Knightdale, NC 27545-9754 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.376	Nonpriority creditor's name and mailing address Ian Miller 1105 Country Ridge Dr Raleigh, NC 27609-5422 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.377	Nonpriority creditor's name and mailing address Ian Shields 318 Polk St Raleigh, NC 27604-1250	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.378	Nonpriority creditor's name and mailing address iHeartMedia Attn: Managing Agent P.O. Box 406372 Atlanta, GA 30384	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.379	Nonpriority creditor's name and mailing address INDY Week Attn: Managing Agent P.O. Box 1772 Durham, NC 27702	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.380	Nonpriority creditor's name and mailing address Inna Shapiro 112 Chesley Ln Chapel Hill, NC 27514-1459	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.381	Nonpriority creditor's name and mailing address Ira Parkman 7029 Millstone Ridge Ct Raleigh, NC 27614-6535	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.382	Nonpriority creditor's name and mailing address Iris Pritchard 2101 Ridge Rd. Raleigh, NC 27607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.383	Nonpriority creditor's name and mailing address Ivey Thigpen 403 Azure Ct Laurinburg, NC 28352-3501	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.384	Nonpriority creditor's name and mailing address J D Wagner 8008 Crookneck Dr Angier, NC 27501-6094	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.385	Nonpriority creditor's name and mailing address J. Gray McAllister III 212 Cedar Breeze Ln Chapel Hill, NC 27517	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.386	Nonpriority creditor's name and mailing address Jack Boyne 807 Harvey St. Raleigh, NC 27608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.387	Nonpriority creditor's name and mailing address Jack Hart 112 Mantle Drive Clayton, NC 27527	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.388	Nonpriority creditor's name and mailing address Jack Tiger 1005 Saint Emilion Ct Apex, NC 27502-1890	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.389	Nonpriority creditor's name and mailing address James Coleman 3372 North Pitt St Farmville, NC 27828-1677	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.390	Nonpriority creditor's name and mailing address James E. Thiem 634 N Blount St Raleigh, NC 27604-1122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.391	<p>Nonpriority creditor's name and mailing address James Entwistle 329 Nantahala Lake Way Fuquay Varina, NC 27526-0119</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$588.12
3.392	<p>Nonpriority creditor's name and mailing address James Hriso 347 Bridgegate Dr Cary, NC 27519-7191</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.393	<p>Nonpriority creditor's name and mailing address James Klemenz 5124 Wolcott Ct Fuquay Varina, NC 27526-8465</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.394	<p>Nonpriority creditor's name and mailing address James Knopp 1316 Lincoln Mill Durham, NC 27703</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.395	<p>Nonpriority creditor's name and mailing address James M. Taylor PO Box 207 Vanceboro, NC 28586-0207</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$392.08
3.396	<p>Nonpriority creditor's name and mailing address James Newberry 2212 Misskelly Dr Raleigh, NC 27612-5817</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,176.24
3.397	<p>Nonpriority creditor's name and mailing address James Norris 2801 Dunhaven Dr Garner, NC 27529-5109</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.398	Nonpriority creditor's name and mailing address James Owle 2920 Academy St Sanford, NC 27332-6006	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.399	Nonpriority creditor's name and mailing address James Stone 113 Milby Ct Rocky Mount, NC 27804-7314	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$414.42
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.400	Nonpriority creditor's name and mailing address James Thorpe 116 Shady Meadow Ln Clayton, NC 27520-6404	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.401	Nonpriority creditor's name and mailing address James Whitley 510 Glenwood Ave Apt 407 Raleigh, NC 27603-1262	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.402	Nonpriority creditor's name and mailing address Jan Silverman 210 Glenhaven Dr Chapel Hill, NC 27516	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.403	Nonpriority creditor's name and mailing address Jan Southall 609 Old Farm Rd Raleigh, NC 27606-2245	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$588.12
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.404	Nonpriority creditor's name and mailing address Jan Wheless 222 Harbor Rd Reidsville, NC 27320-9524	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.405	Nonpriority creditor's name and mailing address Jane Brady PO Box 6473 Raleigh, NC 27628-6473	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.406	Nonpriority creditor's name and mailing address Jane Brocious 105 Stagecrest Dr Raleigh, NC 27603-5501	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.407	Nonpriority creditor's name and mailing address Jane Parker 9404 S Mere Ct Raleigh, NC 27615-2319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.408	Nonpriority creditor's name and mailing address Jane Scherr 3600 Cumberland Creek Road #205 Raleigh, NC 27613	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.409	Nonpriority creditor's name and mailing address Jane Stober 729 Swan Neck Ln Raleigh, NC 27615-6259	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.410	Nonpriority creditor's name and mailing address Janet Allen 7900 Hinton Rd. Wake Forest, NC 27587-8969	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.411	Nonpriority creditor's name and mailing address Janet Ruby 203 Coltsgate Dr. Cary, NC 27518-8316	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.412	Nonpriority creditor's name and mailing address Janet Sniffin 103 Twilight Ct Cary, NC 27513-2839	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$980.20
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.413	Nonpriority creditor's name and mailing address Janet Watson 3801 Westridge Circle Dr Ste A Rocky Mount, NC 27804-3360	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.414	Nonpriority creditor's name and mailing address Janice Brattin 2301 Spruce Grove Ct Raleigh, NC 27614-6850	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.415	Nonpriority creditor's name and mailing address Janice Giggey 10820 Ashland Mill Ct Raleigh, NC 27617-7766	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.416	Nonpriority creditor's name and mailing address Janice Given 333 Hamilton St Roanoke Rapids, NC 27870-2007	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.417	Nonpriority creditor's name and mailing address Janice Pellicore 4835 Radcliff Rd Raleigh, NC 27609-5317	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.418	Nonpriority creditor's name and mailing address Janna Whitt 724 Sarazen Dr Clayton, NC 27527-3918	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.419	Nonpriority creditor's name and mailing address Jarvis Campbell 615 Carrington Ln Winterville, NC 28590-9723	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$430.78
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.420	Nonpriority creditor's name and mailing address Jason King 119 Dalmeny Dr Cary, NC 27513-2815	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.421	Nonpriority creditor's name and mailing address Jason Shallcross 110 Grey Bridge Row Cary, NC 27513-3452	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.422	Nonpriority creditor's name and mailing address Jay M Brown 103 Hebride Ct Cary, NC 27513-4772	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.423	Nonpriority creditor's name and mailing address Jay Taylor 3656 Sleepy Hollow Rd Wake Forest, NC 27587-8301	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.424	Nonpriority creditor's name and mailing address Jean M. Gursin 918 Belhaven Rd Cary, NC 27513-3918	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.425	Nonpriority creditor's name and mailing address Jean Morin 192 Waterpine Dr Garner, NC 27529-7177	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.426	Nonpriority creditor's name and mailing address Jean Sander 1504 Cooper Falls Ln Raleigh, NC 27614-8792	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.427	Nonpriority creditor's name and mailing address Jeanne Walther 1717 River Bend Ln Raleigh, NC 27610-9413	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.428	Nonpriority creditor's name and mailing address Jeff Scroggs 2722 Van Dyke Ave Raleigh, NC 27607-7147	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.429	Nonpriority creditor's name and mailing address Jeff Weatherspoon 6404 Sassafras Ln Raleigh, NC 27614-9210	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.430	Nonpriority creditor's name and mailing address Jeffrey Endrusick 7032 Hasentree Club Dr. Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.431	Nonpriority creditor's name and mailing address Jeffrey P. Howsam 4917 N. Hills Dr. Raleigh, NC 27612	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.432	Nonpriority creditor's name and mailing address Jennell Little 818 Northbrook Dr Raleigh, NC 27609-5516	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.433	Nonpriority creditor's name and mailing address Jennette Yates 45 Remington Ct Youngsville, NC 27596-8730	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.434	Nonpriority creditor's name and mailing address Jennie Barringer 3109 Sun Dr Raleigh, NC 27614-9225	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.435	Nonpriority creditor's name and mailing address Jennie Everett 6513 Pulleytown Rd Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.436	Nonpriority creditor's name and mailing address Jennifer McClendon 513 Wild Rose Ct Raleigh, NC 27615-3165	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.437	Nonpriority creditor's name and mailing address Jennifer Persson 217 Azalea View Way Holly Springs, NC 27540-5416	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$482.67
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.438	Nonpriority creditor's name and mailing address Jennifer Persson 217 Azalea View Way Holly Springs, NC 27540-5416	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$858.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.439	Nonpriority creditor's name and mailing address Jennifer Persson 217 Azalea View Way Holly Springs, NC 27540-5416	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$429.04
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.440	Nonpriority creditor's name and mailing address Jennifer Persson 217 Azalea View Way Holly Springs, NC 27540-5416	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$375.41
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.441	Nonpriority creditor's name and mailing address Jennifer Wheeler 520 Golden Plum Ln Zebulon, NC 27597-9267	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.442	Nonpriority creditor's name and mailing address Jeremy Gupton 3720 Dusty Ln Raleigh, NC 27604-4231	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.443	Nonpriority creditor's name and mailing address Jeremy Hart 2151 Goldston Carbonton Rd Goldston, NC 27252-9484	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.444	Nonpriority creditor's name and mailing address Jerry Monday 400 Hillandale Dr Raleigh, NC 27609-7037	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.445	Nonpriority creditor's name and mailing address Jerry Morris 1318 Farm View Rd Hillsborough, NC 27278-9400	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.446	Nonpriority creditor's name and mailing address Jerry Smith 501 Woodwind Ct Raleigh, NC 27614-9623	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.447	Nonpriority creditor's name and mailing address Jessica Dixon 425 Farmington Woods Dr Cary, NC 27511-5643	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$690.70
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.448	Nonpriority creditor's name and mailing address Jessica Murray 2006 Beecham Cir Raleigh, NC 27607-3321	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.449	Nonpriority creditor's name and mailing address Jewell S. Clark 514 5th Ave N Surfside Beach, SC 29575-3958	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.450	Nonpriority creditor's name and mailing address Jewell S. Clark 514 5th Ave N Surfside Beach, SC 29575-3958	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.451	Nonpriority creditor's name and mailing address Jill Heath 2004 Buckingham Rd Raleigh, NC 27607-3113	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.452	Nonpriority creditor's name and mailing address Jill Heath 2004 Buckingham Rd Raleigh, NC 27607-3113	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.453	Nonpriority creditor's name and mailing address Jill Pike 7911 Footman Way Raleigh, NC 27615-4381	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.454	Nonpriority creditor's name and mailing address Jim VanKirk 2345 Airline Dr. Raleigh, NC 27607	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$430.78
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.455	Nonpriority creditor's name and mailing address Jimmy Gurley PO Box 90515 Raleigh, NC 27675	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$406.26
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.456	Nonpriority creditor's name and mailing address Joan Drucker 49 Birnham Ln Durham, NC 27707-5174	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.457	Nonpriority creditor's name and mailing address Joan Fletcher 21 Cotswold Pl Durham, NC 27707-5514	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.458	Nonpriority creditor's name and mailing address Joann Miller 10359 Nash Chapel Hill, NC 27517	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.459	Nonpriority creditor's name and mailing address Joanna Alevizatos 2809 Polesdon Ct Raleigh, NC 27615-3973	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.460	Nonpriority creditor's name and mailing address Joanne Fruth 195 Lynn Smith Rd. Semora, NC 27343	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.461	Nonpriority creditor's name and mailing address Jodi Anderson 8420 Lentic Ct Raleigh, NC 27615-4964	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.462	Nonpriority creditor's name and mailing address Jody Frank 3720 Sparrow Pond Ln Raleigh, NC 27606-8499	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.463	Nonpriority creditor's name and mailing address John Alexander Jr. 2809 Manning Pl Raleigh, NC 27608-1137	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.464	Nonpriority creditor's name and mailing address John Boyne 1800 Park Dr Raleigh, NC 27605-1613	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.465	Nonpriority creditor's name and mailing address John Buben 108 White Lake Ct Cary, NC 27519-9510	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.466	Nonpriority creditor's name and mailing address John Byrne 333 S Main St Fuquay Varina, NC 27526-2261	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.467	Nonpriority creditor's name and mailing address John Grover 107 Kylie Savannah Ct Cary, NC 27511-3877	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.468	Nonpriority creditor's name and mailing address John Gunther 2222 Valley Forge Dr Raleigh, NC 27615-1800	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.469	Nonpriority creditor's name and mailing address John H. Struss 617 Webster St Cary, NC 27511-3549	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$828.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.470	Nonpriority creditor's name and mailing address John Kieffer 104 Hawthorne Ct. Havelock, NC 28532-9650	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.471	Nonpriority creditor's name and mailing address John Kucik 11217 Emerald Creek Dr Raleigh, NC 27617	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.472	Nonpriority creditor's name and mailing address John Miller 182 Adrian St Holly Springs, NC 27540	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.473	Nonpriority creditor's name and mailing address John P. Riedy 1613 Hunting Ridge Rd Raleigh, NC 27615-7028	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.474	Nonpriority creditor's name and mailing address John Poole 102 Inlet Ct Emerald Isle, NC 28594-2011	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.475	Nonpriority creditor's name and mailing address John Puzak 6113 Leesburg Ln Raleigh, NC 27617-8319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.476	Nonpriority creditor's name and mailing address John Stewart 217 Waterford Park Ln Raleigh, NC 27615-2091	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.477	Nonpriority creditor's name and mailing address Johnny Beal 2625 Poole Rd Raleigh, NC 27610-2821	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.478	Nonpriority creditor's name and mailing address Jolee Faison 3301 Flat River Dr Durham, NC 27703-7871	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.479	Nonpriority creditor's name and mailing address Jon Anglemeyer 1174 Poore Farm Rd Chocowinity, NC 27817	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.480	Nonpriority creditor's name and mailing address Jonathan Shaffer 118 Twinberry Ln Garner, NC 27529-5937	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.481	Nonpriority creditor's name and mailing address Joseph Brannan 3400 Sumner Blvd Raleigh, NC 27616-2950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.482	Nonpriority creditor's name and mailing address Joseph E. Agsten 2202 Emerson Rd Kinston, NC 28504-1312	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.483	Nonpriority creditor's name and mailing address Joseph E. Agsten 2202 Emerson Rd Kinston, NC 28504-1312	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.484	Nonpriority creditor's name and mailing address Joseph Grover 103 Dairy Glen Rd Chapel Hill, NC 27516-4350	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$259.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.485	Nonpriority creditor's name and mailing address Joseph Grover 103 Dairy Glen Rd Chapel Hill, NC 27516-4350	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$432.20
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.486	Nonpriority creditor's name and mailing address Joseph Peacos 1302 W Ragsdale Rd Greenville, NC 27858-4715	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.487	Nonpriority creditor's name and mailing address Joseph Supple 2028 Englewood Ave Durham, NC 27705-4113	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.488	Nonpriority creditor's name and mailing address Joyce Rothchild 11030 Louson Pl Raleigh, NC 27614-6728	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.489	Nonpriority creditor's name and mailing address JT Austin Production Attn: Managing Agent 2500 Buckingham Drive Sanford, NC 27330 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.490	Nonpriority creditor's name and mailing address Judi Corke 5974 Big Nance Dr Raleigh, NC 27616-5795 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.491	Nonpriority creditor's name and mailing address Judith Langston 518 Old Dam Rd Selma, NC 27576-8556 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.492	Nonpriority creditor's name and mailing address Judith Newman 1229 Blenheim Dr Raleigh, NC 27612-5513 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.493	Nonpriority creditor's name and mailing address Judith Wilson 1621 Lake Glen Dr Fuquay Varina, NC 27526-6948 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.494	Nonpriority creditor's name and mailing address Judy Colby 8408 Seagate Dr Raleigh, NC 27615-4433 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.495	Nonpriority creditor's name and mailing address Judy Doss 2720 Townedge Ct Raleigh, NC 27612-4301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.496	Nonpriority creditor's name and mailing address Judy Doss 2720 Townedge Ct Raleigh, NC 27612-4301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.497	Nonpriority creditor's name and mailing address Judy Fitzpatrick 30 Arrowhead Dr Hubert, NC 28539-4102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.498	Nonpriority creditor's name and mailing address Judy Fitzpatrick 30 Arrowhead Dr Hubert, NC 28539-4102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.499	Nonpriority creditor's name and mailing address Judy LeGrand 1908 Banbury Rd Raleigh, NC 27608-1120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.500	Nonpriority creditor's name and mailing address Judy Newsome 237 Strathburgh Ln Cary, NC 27518-9036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.501	Nonpriority creditor's name and mailing address Judy Rosalez 217 Abbey View Way Cary, NC 27519	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.502	Nonpriority creditor's name and mailing address Judy Shutak 1133 Farmers Branch Rd Willow Spring, NC 27592-8971	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.503	Nonpriority creditor's name and mailing address Julia Mobley 6043 Dolphin Rd Oriental, NC 28571	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.504	Nonpriority creditor's name and mailing address Julie Parenteau 305 Twain Dr Garner, NC 27529-9567	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.505	Nonpriority creditor's name and mailing address Julieanna Moeykens 13100 Townfield Drive Raleigh, NC 27614	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.506	Nonpriority creditor's name and mailing address June Atkinson 3913 Sunset Maple Ct Raleigh, NC 27612-4237	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.507	Nonpriority creditor's name and mailing address K.D. Kennedy 714 W. Johnson Street Raleigh, NC 27603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Unpaid rent at conservatory</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.508	Nonpriority creditor's name and mailing address Karen Coates 318 Weston Estates Way Morrisville, NC 27560-6990	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.509	Nonpriority creditor's name and mailing address Karen Daniels 233 South Hillcrest Dr. Goldsboro, NC 27534	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.510	Nonpriority creditor's name and mailing address Karen Daniels 233 South Hillcrest Dr. Goldsboro, NC 27534	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.511	Nonpriority creditor's name and mailing address Karen Gardner 2095 Hickory Rock Rd Louisburg, NC 27549-8183	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.512	Nonpriority creditor's name and mailing address Karen Riedell 1824 Lodestar Dr Raleigh, NC 27615-2602	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.513	Nonpriority creditor's name and mailing address Karen Waller 4321 S Mountain Dr Raleigh, NC 27603-9098	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.514	Nonpriority creditor's name and mailing address Karin True 104 Brannon Court Chapel Hill, NC 27516	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.515	Nonpriority creditor's name and mailing address Karlene Turrentine 5907 Sentinel Dr Raleigh, NC 27609	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.516	Nonpriority creditor's name and mailing address Kate Frohman 401 Adian Trail, Apt 306 Raleigh, NC 27606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.517	Nonpriority creditor's name and mailing address Kate Gerowitz 8600 Battom Ct Raleigh, NC 27613-1201 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.518	Nonpriority creditor's name and mailing address Kate Hall 2312 Pastille Ln Raleigh, NC 27612-2830 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$552.56
3.519	Nonpriority creditor's name and mailing address Kate Longley 8013 Pony Pasture Ct Raleigh, NC 27612-7376 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.520	Nonpriority creditor's name and mailing address Katherine Burke 9434 Foxgrove Ct Raleigh, NC 27617-8622 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.521	Nonpriority creditor's name and mailing address Katherine Dow 115 Loch Vale Ln Cary, NC 27518-9617 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.522	Nonpriority creditor's name and mailing address Kathleen Burkett 101 Duckhead Pt Cary, NC 27518-8321 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.523	Nonpriority creditor's name and mailing address Kathleen McDermott 1409 Kingside Ct Wake Forest, NC 27587-2931 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$691.52

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.524	Nonpriority creditor's name and mailing address Kathryn A. Davis 1514 Kildaire Farm Rd Cary, NC 27511-6552	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.525	Nonpriority creditor's name and mailing address Kathryn Peay 223 Windsor Wynd PI Fuquay Varina, NC 27526-6629	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.526	Nonpriority creditor's name and mailing address Kathy Best 214 W James St Mount Olive, NC 28365-1629	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.527	Nonpriority creditor's name and mailing address Kathy Griffin 505 E H St Erwin, NC 28339-2208	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.528	Nonpriority creditor's name and mailing address Kathy Halula 1800 Bridgeport Dr Raleigh, NC 27615-4408	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.529	Nonpriority creditor's name and mailing address Kathy Honeyman 5946 Sentinel Dr Raleigh, NC 27609-3510	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.530	Nonpriority creditor's name and mailing address Kathy Lewis 2604 Charenson PI Raleigh, NC 27614-9860	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.531	Nonpriority creditor's name and mailing address Kathy Millwee 8817 Breeland Way Raleigh, NC 27613-5315	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.532	Nonpriority creditor's name and mailing address Kathy Moody 2460 Sapphire Valley Dr Raleigh, NC 27604-1491	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.533	Nonpriority creditor's name and mailing address Kathy Moore 3700 Swann St Raleigh, NC 27612-4616	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$828.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.534	Nonpriority creditor's name and mailing address Kathy Voss 804 Blue Thorn Dr Apex, NC 27539-9106	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.535	Nonpriority creditor's name and mailing address Kay Burgess 108 Wildbrook Ct Cary, NC 27519	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.536	Nonpriority creditor's name and mailing address Kay Weaver 2907 Schooner Lane Grimesland, NC 27837	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.537	Nonpriority creditor's name and mailing address Keith & Belinda Shannon 205 Kentigern Drive Raleigh, NC 27606	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100,000.00
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: _____		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.538	Nonpriority creditor's name and mailing address Keith Bajura 6032 Drumquin Dr Raleigh, NC 27614-7163	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.539	Nonpriority creditor's name and mailing address Keith Beamon 245 Batten Farm Rd Selma, NC 27576-7167	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.540	Nonpriority creditor's name and mailing address Keith Shannon 205 Kentigern Dr Raleigh, NC 27606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.541	Nonpriority creditor's name and mailing address Kelly Alexander 210 Sunset Drive Chapel Hill, NC 27516	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.542	Nonpriority creditor's name and mailing address Kelly Anne Fisher 80 Forest Brook Way Clayton, NC 27520	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.543	Nonpriority creditor's name and mailing address Kelly Kuss 7916 Mayapple Pl Raleigh, NC 27613-4078	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.544	Nonpriority creditor's name and mailing address Kelsey Slinkard 216 Whistling Swan Dr Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.545	Nonpriority creditor's name and mailing address Ken Dunn 3813 Wesley Ridge Dr Apex, NC 27539-5712	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.546	Nonpriority creditor's name and mailing address Ken Killinger 158 Westbrook Dr Butner, NC 27509-1633	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.547	Nonpriority creditor's name and mailing address Kendra Dillingham 1533 Laureldale Dr Raleigh, NC 27609-3572	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.548	Nonpriority creditor's name and mailing address Kennedy Office Supply Attn: Managing Agent P.O. Box 40847 Raleigh, NC 27629	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.549	Nonpriority creditor's name and mailing address Kenneth Edge 27 Bailywick Dr Clayton, NC 27527-9801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.550	Nonpriority creditor's name and mailing address Kenneth R. Marshburn 145 Clayfield Dr Garner, NC 27529-4995	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.551	Nonpriority creditor's name and mailing address Kent Edwards 809 Mount Vernon Rd Ste 101 Raleigh, NC 27607-5247	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.552	Nonpriority creditor's name and mailing address Kentaro Kato 107 King William Rd Raleigh, NC 27610-1801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.553	Nonpriority creditor's name and mailing address Kevin Angley 1016 Harvest Mill Ct Raleigh, NC 27610-9734	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.554	Nonpriority creditor's name and mailing address Kiersten Bass 400 W North Street #1426 Raleigh, NC 27603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.555	Nonpriority creditor's name and mailing address Kim Coman PO Box 18442 Raleigh, NC 27619-8442	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.556	Nonpriority creditor's name and mailing address Kim Mercer 911 W South St Raleigh, NC 27603-2159	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.557	Nonpriority creditor's name and mailing address Kimberly Johnson 492 Mount Carmel Church Rd Ne Pikeville, NC 27863-9174	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.558	Nonpriority creditor's name and mailing address Kimberly Lee 511 Lake Royale Louisburg, NC 27549-9572	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.559	<p>Nonpriority creditor's name and mailing address Kimberly Merida 117 Haringey Dr Raleigh, NC 27615-1957</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,105.12
3.560	<p>Nonpriority creditor's name and mailing address Kimberly Tyndall 2808 Aldershot Dr Wake Forest, NC 27587-6617</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.561	<p>Nonpriority creditor's name and mailing address Kirsten Snater 6004 Eaglesfield Dr. Raleigh, NC 27613</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.562	<p>Nonpriority creditor's name and mailing address KLR Design, LLC Attn: Managing Agent 8504 Riddle Place Raleigh, NC 27615</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,250.00
3.563	<p>Nonpriority creditor's name and mailing address Kristen Wilson 1728 Fairbanks Rd Cary, NC 27513-2616</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52
3.564	<p>Nonpriority creditor's name and mailing address Kristi Hanzel 67 Middlecrest Way Clayton, NC 27527-9133</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.565	<p>Nonpriority creditor's name and mailing address Kristin White 214 Myers Ave Raleigh, NC 27604-2327</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.566	Nonpriority creditor's name and mailing address Kristina Brunelle 4724 Sharpstone Ln Raleigh, NC 27615-1680	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.567	Nonpriority creditor's name and mailing address Krystin Jorgenson 1228 Chapanoke Rd. Raleigh, NC 27603	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.568	Nonpriority creditor's name and mailing address Laneta Dorflinger 211 Versailles Dr Cary, NC 27511-6010	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.569	Nonpriority creditor's name and mailing address Lanier Murr 7924 Suterton Ct Raleigh, NC 27615-2534	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$587.30
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.570	Nonpriority creditor's name and mailing address Larry Asher 4608 Forest Highland Dr Raleigh, NC 27604-8417	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.571	Nonpriority creditor's name and mailing address Larry Gibbs 2601 Wendler Ct Wake Forest, NC 27587-5456	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.572	Nonpriority creditor's name and mailing address Larry Nunnery 5512 Kimbrook Dr Raleigh, NC 27612-5937	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.573	Nonpriority creditor's name and mailing address Larry Robbins 4101 Lake Boone Trl. #300 Raleigh, NC 27607-3075	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.574	Nonpriority creditor's name and mailing address Larry Sampson 8320 Morgans Way Raleigh, NC 27613-4367	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.575	Nonpriority creditor's name and mailing address Larry Williams 415 Fairview Rd Apex, NC 27502-1303	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.576	Nonpriority creditor's name and mailing address Laura Elwardany 200 Lively Oaks Way Holly Springs, NC 27540	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.577	Nonpriority creditor's name and mailing address Laura Street 2162 Brogden Rd Creedmoor, NC 27522-9212	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.578	Nonpriority creditor's name and mailing address Laura Taylor 96 Everwood Dr Four Oaks, NC 27524-6204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.579	Nonpriority creditor's name and mailing address Lauren Faulkner 206 Clifton Ridge Ct Louisburg, NC 27549-9031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.580	Nonpriority creditor's name and mailing address Lauren Kennedy Brady 2000 Banbury Rd Raleigh, NC 27608-1122	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.581	Nonpriority creditor's name and mailing address Laurie Price 108 Sutton Springs Dr Garner, NC 27529	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.582	Nonpriority creditor's name and mailing address Lawrence Marshall 208 Holmby Ct Holly Springs, NC 27540-8320	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.583	Nonpriority creditor's name and mailing address Lawrence Marshall 208 Holmby Ct Holly Springs, NC 27540-8320	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.584	Nonpriority creditor's name and mailing address Lawrence Marshall 208 Holmby Ct Holly Springs, NC 27540-8320	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.585	Nonpriority creditor's name and mailing address Lawrence Velky 621 Cresstar Dr. Rolesville, NC 27571	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.586	Nonpriority creditor's name and mailing address Lee Ann Tharrington 5216 Shamrock Dr Raleigh, NC 27612-6210	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.587	Nonpriority creditor's name and mailing address Lee Smither 1508 Ridge Rd Raleigh, NC 27607-6731	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.588	Nonpriority creditor's name and mailing address LeGrande Smith 4801 Inwood Rd Raleigh, NC 27603-3307	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.589	Nonpriority creditor's name and mailing address Leonard Bush 1801 Manuel St Raleigh, NC 27612-5548	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.590	Nonpriority creditor's name and mailing address Lesa Hines 140 Light Falls Dr Wake Forest, NC 27587-5753	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.591	Nonpriority creditor's name and mailing address Lesa Hines 140 Light Falls Dr Wake Forest, NC 27587-5753	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.592	Nonpriority creditor's name and mailing address Lesley Jones 6596 Little Satterwhite Rd Oxford, NC 27565-8243	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.593	Nonpriority creditor's name and mailing address Lesley Tronic 6103 Mount Carmel Parke Wilmington, NC 28412-5006	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.594	Nonpriority creditor's name and mailing address Leslie F. Lindquist 308 Springtree Cir Fuquay Varina, NC 27526-3515	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.595	Nonpriority creditor's name and mailing address Leslie-Anne Ball 1408 Barn Door Dr Apex, NC 27502-7065	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.596	Nonpriority creditor's name and mailing address Lila Montgomery 316 Rock Cir Clayton, NC 27520-8037	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.597	Nonpriority creditor's name and mailing address Lila Montgomery 316 Rock Cir Clayton, NC 27520-8037	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.598	Nonpriority creditor's name and mailing address Linda Allen 1629 Parker Rd Four Oaks, NC 27524-7907	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.599	Nonpriority creditor's name and mailing address Linda Anderson 47 Lakeview Dr Whispering Pines, NC 28327-9405	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.600	Nonpriority creditor's name and mailing address Linda Anderson 47 Lakeview Dr Whispering Pines, NC 28327-9405	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.601	<p>Nonpriority creditor's name and mailing address Linda Booth 193 Yacht Club Dr Newport, NC 28570-9085</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.602	<p>Nonpriority creditor's name and mailing address Linda Brannan 3012 Dunkirk Dr Raleigh, NC 27613-4384</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.603	<p>Nonpriority creditor's name and mailing address Linda Butz 885 Rawls Club Rd Fuquay Varina, NC 27526-8025</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.604	<p>Nonpriority creditor's name and mailing address Linda Crowder-Harper 5305 Daleview Dr Raleigh, NC 27610-2113</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.605	<p>Nonpriority creditor's name and mailing address Linda Harvey 221 Forest Rd Raleigh, NC 27605-1757</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.606	<p>Nonpriority creditor's name and mailing address Linda Lindsay 2627 Silas Peak Ln Apex, NC 27523-7160</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.607	<p>Nonpriority creditor's name and mailing address Linda Lytvinenko 153 Coffee Bluff Ln Holly Springs, NC 27540-7982</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.608	Nonpriority creditor's name and mailing address Linda Piper 4430 Sun Valley Drive Chapel Hill, NC 27514	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.609	Nonpriority creditor's name and mailing address Linda Schadler 207 Sumrell St Greenville, NC 27858-8664	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.610	Nonpriority creditor's name and mailing address Linda Sparks 5105 Six Point Trl Raleigh, NC 27616-6231	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.611	Nonpriority creditor's name and mailing address Lisa Ellison 8300 Heel Stone Ct Raleigh, NC 27613	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.612	Nonpriority creditor's name and mailing address Lisa Grable 749 Powell Dr Raleigh, NC 27606-1625	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.613	Nonpriority creditor's name and mailing address Lisa Grele Barrie 811 N Bloodworth St Raleigh, NC 27604-1231	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.614	Nonpriority creditor's name and mailing address Lisbi Abraham 2008 Mill Gate Lane Cary, NC 27519	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.615	Nonpriority creditor's name and mailing address Lissa Johnsen 1319 Ridge Rd Raleigh, NC 27607-6836	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.616	Nonpriority creditor's name and mailing address Lissa Johnsen 1319 Ridge Rd Raleigh, NC 27607-6836	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.617	Nonpriority creditor's name and mailing address Lloyd Tapp 102 Kinnaird Ln Cary, NC 27511-6530	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.618	Nonpriority creditor's name and mailing address Lois Campbell 1317 Weidmann Dr Raleigh, NC 27614-9018	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.619	Nonpriority creditor's name and mailing address Lois Reaves 220 Kentucky Dr Clayton, NC 27527	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.620	Nonpriority creditor's name and mailing address Lonnie Bunn 1329 Kings Grant Dr Raleigh, NC 27614-9358	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.621	Nonpriority creditor's name and mailing address Lori Fahs 209 Hidden Stream Dr Apex, NC 27539-7761	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.622	Nonpriority creditor's name and mailing address Lori Langreck 1401 Ivy Leaf Ct Willow Spring, NC 27592-9083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.623	Nonpriority creditor's name and mailing address Lori Meyerhoffer 3324 Clandon Park Dr Raleigh, NC 27613-8840	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.624	Nonpriority creditor's name and mailing address Lori Spivey 203 Chiselhurst Way Cary, NC 27513-5563	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.625	Nonpriority creditor's name and mailing address Lorie Wylie 142 Roan Dr Garner, NC 27529-4371	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.626	Nonpriority creditor's name and mailing address Louise Peranzo 1609 Laughridge Dr Cary, NC 27511-5250	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.627	Nonpriority creditor's name and mailing address Lowell Davidson 2727 Lake Waccamaw Trl Apex, NC 27502-8555	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.628	Nonpriority creditor's name and mailing address Lucy Broadus 97 Black Angus Dr Garner, NC 27529	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.629	Nonpriority creditor's name and mailing address Luis Nieto 100 Swift Creek Xing Durham, NC 27713-7268	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.630	Nonpriority creditor's name and mailing address Luke Foster 4908 Franz Liszt Ct Raleigh, NC 27615-1696	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.631	Nonpriority creditor's name and mailing address Luke Foster 4908 Franz Liszt Ct Raleigh, NC 27615-1696	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.632	Nonpriority creditor's name and mailing address Luke Foster 4908 Franz Liszt Ct Raleigh, NC 27615-1696	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.633	Nonpriority creditor's name and mailing address Luke Simmons 2111 Glover Ln Unit 103 Raleigh, NC 27605-3343	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.634	Nonpriority creditor's name and mailing address Lyn Lowery 9901 Horton Rd New Hill, NC 27562	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.635	Nonpriority creditor's name and mailing address Lynn Hull 105 Hampshire Pl Chapel Hill, NC 27516-8748	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.636	Nonpriority creditor's name and mailing address Lynn Schwartz 8628 Hobhouse Cir Raleigh, NC 27615-8100	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.637	Nonpriority creditor's name and mailing address Lynn Tew 607 West Pearsall St. Dunn, NC 28334	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.638	Nonpriority creditor's name and mailing address Lynwood Riggs PO Box 1537 Kinston, NC 28503-1537	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.639	Nonpriority creditor's name and mailing address Macy Foster 970 Meadow Ln Henderson, NC 27536-3853	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.640	Nonpriority creditor's name and mailing address Mallorye Lovett 3009 Abington Lane Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.641	Nonpriority creditor's name and mailing address Manal El-Ramly 2416 Trenton Woods Way Raleigh, NC 27607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.642	Nonpriority creditor's name and mailing address Mara Saskin 3406 Cedarbird Way Durham, NC 27707-9227	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.643	Nonpriority creditor's name and mailing address Mara Saskin 3406 Cedarbird Way Durham, NC 27707-9227	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$777.55
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.644	Nonpriority creditor's name and mailing address Marc Glova 4621 White Chapel Way Raleigh, NC 27615-1675	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.645	Nonpriority creditor's name and mailing address Marcia Morton 1612 High Holly Ln Raleigh, NC 27614-8744	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.646	Nonpriority creditor's name and mailing address Margaret Crouch 429 Chadwick Dr Raleigh, NC 27609-4561	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$689.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.647	Nonpriority creditor's name and mailing address Margaret Porter 106 Majnun Ln Cary, NC 27513-5324	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.648	Nonpriority creditor's name and mailing address Margaret Smedes Poyner 4412 Delta Lake Dr Raleigh, NC 27612-7006	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.649	Nonpriority creditor's name and mailing address Margaret Stack 1105 Heathwood Dairy Rd Apex, NC 27502-4046	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.650	Nonpriority creditor's name and mailing address Margery Sved PO Box 37247 Raleigh, NC 27627-7247	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.651	Nonpriority creditor's name and mailing address Maria Amigo 102 Larkspur Ln Cary, NC 27513-2726	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.652	Nonpriority creditor's name and mailing address Maria Ashbaugh 5131 Olivias Ln Raleigh, NC 27606-4084	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.653	Nonpriority creditor's name and mailing address Mariann Meleg 5420 Oldtowne Rd Raleigh, NC 27612-6112	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.654	Nonpriority creditor's name and mailing address Marilyn Hays 2315 Faucette Ave Durham, NC 27704-5161	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.655	Nonpriority creditor's name and mailing address Marilyn Kelley 2103 Carriage Way Chapel Hill, NC 27517-9466	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.656	Nonpriority creditor's name and mailing address Marilyn Kvanvig 2505 Eddystone Rd Raleigh, NC 27612-6714	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.657	Nonpriority creditor's name and mailing address Marilyn Webb 2617 Cloud Mist Cir Raleigh, NC 27614-6630	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.658	Nonpriority creditor's name and mailing address Mark Hand 2628 Winter Storm Rd Zebulon, NC 27597-7359	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.659	Nonpriority creditor's name and mailing address Mark Hogan 9567 Brookchase Dr Raleigh, NC 27617-7349	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.660	Nonpriority creditor's name and mailing address Mark Hogan 9567 Brookchase Dr Raleigh, NC 27617-7349	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.661	Nonpriority creditor's name and mailing address Mark Kantrowitz 1210 Atticus Way Durham, NC 27703-0139	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.662	Nonpriority creditor's name and mailing address Mark Munday 8120 Old Deer Trl Raleigh, NC 27615-5123	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.663	Nonpriority creditor's name and mailing address Mark Papich 1407 Bloomingdale Dr Cary, NC 27511-5953	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.664	Nonpriority creditor's name and mailing address Mark Whitlock 290 Silver Creek Dr Clayton, NC 27520-9725	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.665	Nonpriority creditor's name and mailing address Marlene Lynch 11316 Emerald Creek Dr Raleigh, NC 27617-8751	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.666	Nonpriority creditor's name and mailing address Marshall Peterson 73 Tall Oak Ct Clayton, NC 27520-7138	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.667	Nonpriority creditor's name and mailing address Martha Bright PO Box 553 Sanford, NC 27331-0553	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.668	Nonpriority creditor's name and mailing address Martha Bulluck 2014 Templeton Gap Dr Apex, NC 27523-3832	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.669	Nonpriority creditor's name and mailing address Martha Guthe 614 Bloomsbury Pl Cary, NC 27519-9388	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.670	Nonpriority creditor's name and mailing address Martha L Smith 6505 Orchard Knoll Dr Apex, NC 27539-7107	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.671	Nonpriority creditor's name and mailing address Martha Miller 2225 Stonehenge Dr Apt 1 Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.672	Nonpriority creditor's name and mailing address Marvin Benham 4829 Rembert Dr Raleigh, NC 27612-6237	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.673	Nonpriority creditor's name and mailing address Mary Ashley 1126 Branwell Dr Durham, NC 27703-8365	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.674	Nonpriority creditor's name and mailing address Mary Beth Owens 130 N Longmeadow Rd Greenville, NC 27858-3704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.675	Nonpriority creditor's name and mailing address Mary Faye Whisler 100 Chancellors Ridge Ct Cary, NC 27513-2749	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.676	Nonpriority creditor's name and mailing address Mary Helen Casey 105 Starfish Ct Emerald Isle, NC 28594-2242	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.677	Nonpriority creditor's name and mailing address Mary Jane Bettman 275 Beckingham Loop Cary, NC 27519-6374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.678	Nonpriority creditor's name and mailing address Mary Jarvis PO Box 537 Knightdale, NC 27545-0537	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.679	Nonpriority creditor's name and mailing address Mary Kate Travers 1000 Hazeltown Rd Wake Forest, NC 27587-4444	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.680	Nonpriority creditor's name and mailing address Mary Kathryn Moog 711 Grimstead Cir Cary, NC 27511-5817	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.681	Nonpriority creditor's name and mailing address Mary L Sholl 104 Charles Ct Chocowinity, NC 27817-8870	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.682	Nonpriority creditor's name and mailing address Mary Langworthy 4805 Stoneyoak Ln Raleigh, NC 27610-8008	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.683	Nonpriority creditor's name and mailing address Mary Marsteller 7006 Churchill Falls Pl Apex, NC 27539-9767	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.684	Nonpriority creditor's name and mailing address Mary Morehouse 5705 Lochness Ct Fayetteville, NC 28304-2019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.685	Nonpriority creditor's name and mailing address Mary O. Brady 1325 Hathaway Rd Raleigh, NC 27608-1935	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.686	Nonpriority creditor's name and mailing address Mary Seufert-Fleming 6059 Beale Loop Raleigh, NC 27616-3473	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.687	Nonpriority creditor's name and mailing address Mary Waller 500 Tiffany Cir Garner, NC 27529-4333	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.688	Nonpriority creditor's name and mailing address Mary Wibbens 40 Adams Circle Pinehurst, NC 28374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.689	Nonpriority creditor's name and mailing address Mary Wibbens 40 Adams Circle Pinehurst, NC 28374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.690	Nonpriority creditor's name and mailing address Maryjane Schraner 1609 Cascade Falls Ln Wendell, NC 27591-6879	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.691	Nonpriority creditor's name and mailing address Matthew Yesko 120 Iowa Ln Ste 204 Cary, NC 27511-4499	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.692	Nonpriority creditor's name and mailing address McClatchy Company LLC Attn: Managing Agent P.O. Box 510150 Livonia, MI 48151 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,166.66
3.693	Nonpriority creditor's name and mailing address Meg Cooke 701 White Horse Dr Greenville, NC 27834-7832 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$691.52
3.694	Nonpriority creditor's name and mailing address Melinda Sanders 4504 Rockwood Dr Raleigh, NC 27612-3541 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.695	Nonpriority creditor's name and mailing address Melissa Barker 1529 Jeremy Ln Rocky Mount, NC 27803-1519 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,279.64
3.696	Nonpriority creditor's name and mailing address Melissa Barker 1529 Jeremy Ln Rocky Mount, NC 27803-1519 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$259.32
3.697	Nonpriority creditor's name and mailing address Merlin Young 107 Colonial Dr Wendell, NC 27591-2050 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$691.52
3.698	Nonpriority creditor's name and mailing address Merritt Atkins 819 North Bloodworth St. Raleigh, NC 27604 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.699	Nonpriority creditor's name and mailing address Mia McDonald 1225 N. Blount St. Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.700	Nonpriority creditor's name and mailing address Michael Allen 100 Hebride Ct Cary, NC 27513-4772	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.701	Nonpriority creditor's name and mailing address Michael Cramer 945 Lukestone Dr Fuquay Varina, NC 27526-5261	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.702	Nonpriority creditor's name and mailing address Michael D. Masters 2720 Farnborough Rd Raleigh, NC 27613-1602	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.703	Nonpriority creditor's name and mailing address Michael Fury 2308 Pastille Ln Raleigh, NC 27612-2830	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.704	Nonpriority creditor's name and mailing address Michael G. Brown 7209 North Ridge Drive Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.705	Nonpriority creditor's name and mailing address Michael Gentile 3734 Carbonton Rd Sanford, NC 27330-8727	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.706	Nonpriority creditor's name and mailing address Michael Houston 1033 Bellewood Farms Rd Raleigh, NC 27603-7957	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.707	Nonpriority creditor's name and mailing address Michael Luke 4604 Silver Charm Dr Knightdale, NC 27545-7449	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.708	Nonpriority creditor's name and mailing address Michael Porter 420 Brightling Way Holly Springs, NC 27540	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.709	Nonpriority creditor's name and mailing address Michael S. Acuesta 10328 Grafton Rd Raleigh, NC 27615-1145	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.710	Nonpriority creditor's name and mailing address Michael Slaughter 435 Holly Springs Dr Timberlake, NC 27583-7305	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.711	Nonpriority creditor's name and mailing address Michael Slayton 2701 Eastern Star Cir Rolesville, NC 27571-8758	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.712	Nonpriority creditor's name and mailing address Michael Steele 1513 Tradescant Ct Raleigh, NC 27613-7459	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.713	Nonpriority creditor's name and mailing address Michael W. Colopy 512 Cole Stream Ct Cary, NC 27513-8373	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.714	Nonpriority creditor's name and mailing address Michael W. Strickland PO Box 30787 Raleigh, NC 27622-0787	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.715	Nonpriority creditor's name and mailing address Michael Weisel 1907 Victoria Rd Raleigh, NC 27608-1139	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.716	Nonpriority creditor's name and mailing address Michele Horwitz 7017 North Ridge Dr Raleigh, NC 27615-7036	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.717	Nonpriority creditor's name and mailing address Michelle Morrison 6401 Wynbrook Way Raleigh, NC 27612-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.718	Nonpriority creditor's name and mailing address Michelle Morrison 6401 Wynbrook Way Raleigh, NC 27612-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.719	Nonpriority creditor's name and mailing address Michelle Morrison 6401 Wynbrook Way Raleigh, NC 27612-2366	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.720	Nonpriority creditor's name and mailing address Mike Allen 3714 Marsh Creek Rd. Raleigh, NC 27604-4105	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.721	Nonpriority creditor's name and mailing address Mike Giarla 4324 Trenton Rd Chapel Hill, NC 27517-7833	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.722	Nonpriority creditor's name and mailing address Mike Hermida 205 Lifeson Way Cary, NC 27519-0986	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.723	Nonpriority creditor's name and mailing address Mike Marsich 5609 Turner Glen Dr Raleigh, NC 27603-9526	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.724	Nonpriority creditor's name and mailing address Mike Ray 440 Drummond Dr Raleigh, NC 27609-7006	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.725	Nonpriority creditor's name and mailing address Mike Shinners 232 Ivory Ln Raleigh, NC 27610-8295	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.726	Nonpriority creditor's name and mailing address Mike Shinners 232 Ivory Ln Raleigh, NC 27610-8295	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.727	<p>Nonpriority creditor's name and mailing address Mike Wilson PO Box 594 Apex, NC 27502-0594</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.728	<p>Nonpriority creditor's name and mailing address Mildred Watkins 808 Merwin Rd Raleigh, NC 27606-2645</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.729	<p>Nonpriority creditor's name and mailing address Mitch Perry 1909 Rangecrest Rd Raleigh, NC 27612-1715</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.730	<p>Nonpriority creditor's name and mailing address Molly Gudger 111 Fallin Blvd Apt A5 Goldsboro, NC 27534-4369</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.731	<p>Nonpriority creditor's name and mailing address MP Company LLP Attn: Managing Agent 4600 Marriott Drive, Ste 300 Raleigh, NC 27612</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Accounting fees</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$25,700.00
3.732	<p>Nonpriority creditor's name and mailing address Mr Charlie M. Breakiron 209 Kavanagh rd Wake Forest, NC 27587-1779</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.733	<p>Nonpriority creditor's name and mailing address Mr Kenneth R. Bryan 3300 Lonesome Spur Cir Wake Forest, NC 27587-4872</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$430.78

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.734	Nonpriority creditor's name and mailing address Mr William Harris 1130 Luther Rd Apex, NC 27523-5600	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.735	Nonpriority creditor's name and mailing address Ms Donna J. Willis 3000 Windberry St Raleigh, NC 27612-2215	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.736	Nonpriority creditor's name and mailing address Ms. Etta Ball 105 Rolling Ridge Cir Garner, NC 27529-3734	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.737	Nonpriority creditor's name and mailing address MSMT Costume Rentals Attn: Managing Agent 14 Maint Street, Ste 216 Brunswick, ME 04011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.738	Nonpriority creditor's name and mailing address Music Theatre International Attn: Managing Agent 423 West 55 St, 2nd Floor New York, NY 10019	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Licensing rights</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.739	Nonpriority creditor's name and mailing address Nan Maples 10612 Cahill Rd Raleigh, NC 27614-9011	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.740	Nonpriority creditor's name and mailing address Nancy Bender 229 Norwalk St Holly Springs, NC 27540-9404	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.741	Nonpriority creditor's name and mailing address Nancy Bender 229 Norwalk St Holly Springs, NC 27540-9404	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.742	Nonpriority creditor's name and mailing address Nancy Jones 610 S Vermont St Smithfield, NC 27577-3826	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.743	Nonpriority creditor's name and mailing address Nancy Jones 610 S Vermont St Smithfield, NC 27577-3826	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.744	Nonpriority creditor's name and mailing address Nancy O'Neil 1404 Justice Union Ct Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.745	Nonpriority creditor's name and mailing address Nancy Prevatt 4213 Wingate Dr Raleigh, NC 27609-6054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.746	Nonpriority creditor's name and mailing address Nancy S. Parrish 3319 Ridgecrest Ct Raleigh, NC 27607-6763	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.747	Nonpriority creditor's name and mailing address Nancy Seagroves 63 Hamilton Farm Cir Fuquay Varina, NC 27526-5972	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.748	Nonpriority creditor's name and mailing address Nancy Webb 5605 Alta Vista Ct Raleigh, NC 27610-3261	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.749	Nonpriority creditor's name and mailing address Nannette Stangle-Castor 2905 Northrop Ct Raleigh, NC 27614-8092	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.750	Nonpriority creditor's name and mailing address Nannette Stangle-Castor 2905 Northrop Ct Raleigh, NC 27614-8092	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.751	Nonpriority creditor's name and mailing address Natalie Knowles 8720 Blakehurst Dr Raleigh, NC 27617-4785	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.752	Nonpriority creditor's name and mailing address Nick Failing 5612 Neuse St Raleigh, NC 27610-3215	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$568.92
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.753	Nonpriority creditor's name and mailing address Noela Woodall 6101 Shelton Ct Raleigh, NC 27609-8223	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.754	Nonpriority creditor's name and mailing address Noelle White 106 Castle Manor Ct Garner, NC 27529-4522	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.755	Nonpriority creditor's name and mailing address Nona Hardy 4016 Westwood Ln Apex, NC 27539-9762	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.756	Nonpriority creditor's name and mailing address Norman LeFevre 87 Peachtree Ln Clayton, NC 27527-7023	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.757	Nonpriority creditor's name and mailing address Norman Rosenberg 708 Pebblebrook Dr Raleigh, NC 27609-5345	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.758	Nonpriority creditor's name and mailing address On Point Rigging & Staging Attn: Managing Agent 5313 Levering Mill Road Apex, NC 27539	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.759	Nonpriority creditor's name and mailing address Owen W. Reagan III 6001 Fordland Dr Raleigh, NC 27606-4476	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.760	Nonpriority creditor's name and mailing address Pam Cook 6129 Countryview Ln Raleigh, NC 27606-9256	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.761	Nonpriority creditor's name and mailing address Pam Horton 8432 Lochwind Run Raleigh, NC 27615-4965	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.762	Nonpriority creditor's name and mailing address Pam Nelson 4325 Oak Park Rd Raleigh, NC 27612-5639	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.763	Nonpriority creditor's name and mailing address Pam Smith 2309 Hamrick Dr. Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.764	Nonpriority creditor's name and mailing address Pamela Guthrie 4400 Memorial Dr Raleigh, NC 27612-3912	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.765	Nonpriority creditor's name and mailing address Pamela Gwynn 129 Trafalgar Ln Cary, NC 27513-5125	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.766	Nonpriority creditor's name and mailing address Pamela Taylor 104 Glasgow Rd Cary, NC 27511-6516	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.767	Nonpriority creditor's name and mailing address Para Drake 3504 Mossdale Ave Durham, NC 27707	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.768	Nonpriority creditor's name and mailing address Paralea Boose 6505 Amber Bluffs Cres Raleigh, NC 27616-5080	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.769	Nonpriority creditor's name and mailing address Pat Jones 3320 Old Saybrook Ct Raleigh, NC 27612-4928	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.770	Nonpriority creditor's name and mailing address Pat Jones 3320 Old Saybrook Ct Raleigh, NC 27612-4928	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.771	Nonpriority creditor's name and mailing address Patricia Angoli 805 Palmetto Dr Cary, NC 27511-4327	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.772	Nonpriority creditor's name and mailing address Patricia Benedict 4812 Patton Ridge Ct Raleigh, NC 27612-6459	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.773	Nonpriority creditor's name and mailing address Patricia Cease 105 Waterloo Station Dr Cary, NC 27513-5602	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.774	Nonpriority creditor's name and mailing address Patricia Cowan 1515 Saint Marys St Raleigh, NC 27608-2216	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.775	Nonpriority creditor's name and mailing address Patricia Davis 1328 Duplin rd Raleigh, NC 27607	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.776	Nonpriority creditor's name and mailing address Patricia Garrett 658 Casey Dr Grifton, NC 28530-8590	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.777	Nonpriority creditor's name and mailing address Patricia Garrett 658 Casey Dr Grifton, NC 28530-8590	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.778	Nonpriority creditor's name and mailing address Patricia H. Walston 1604 Quaker Ridge Pt Raleigh, NC 27615-5456	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.779	Nonpriority creditor's name and mailing address Patricia Hurlman 3317 Turner Ridge Dr New Hill, NC 27562-9322	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.780	Nonpriority creditor's name and mailing address Patricia Mills 100 Bikram Dr Holly Springs, NC 27540-9667	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.781	Nonpriority creditor's name and mailing address Patricia O'Leary 11401 Burberry Dr Raleigh, NC 27614-9019	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.782	Nonpriority creditor's name and mailing address Patricia Vermillion 11207 Slider Dr Raleigh, NC 27614-6407	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.783	Nonpriority creditor's name and mailing address Patricia Wagner 6206 Cape Charles Dr Raleigh, NC 27617-7637	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.784	Nonpriority creditor's name and mailing address Patrick Stephenson P.O. Box 37875 Raleigh, NC 27627	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.785	Nonpriority creditor's name and mailing address Patti Milligan 8433 Lentic Ct Raleigh, NC 27615-4964	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.786	Nonpriority creditor's name and mailing address Paul Edge 205 Brereton Dr Raleigh, NC 27615-1648	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.787	Nonpriority creditor's name and mailing address Paul Galloway 1421 Turner Farms Rd Garner, NC 27529	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.788	Nonpriority creditor's name and mailing address Paul Meares 9116 Breeland Way Raleigh, NC 27613-5321	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.789	Nonpriority creditor's name and mailing address Paula Bass 11111 Beckstone Way #1F Raleigh, NC 27614	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.790	Nonpriority creditor's name and mailing address Paula Stanley 3933 Bentley Brook Dr Raleigh, NC 27612-8077	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.791	Nonpriority creditor's name and mailing address Paula Zorio 526 N College St Wake Forest, NC 27587-2308	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.792	Nonpriority creditor's name and mailing address Paulette Dillard 301 Fayetteville Street Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.793	Nonpriority creditor's name and mailing address Peg Bedini 337 Springmoor Dr Raleigh, NC 27615-7740	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.794	Nonpriority creditor's name and mailing address Peg Bedini 337 Springmoor Dr Raleigh, NC 27615-7740	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.795	Nonpriority creditor's name and mailing address Peggy Park 437 Kings Hollow Dr Raleigh, NC 27603-9469	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.796	Nonpriority creditor's name and mailing address Penelope McPhail 1300 Tribute Center Dr Apt 150 Raleigh, NC 27612-3220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.797	<p>Nonpriority creditor's name and mailing address Penske Truck Leasing Co. Attn: Managing Agent P.O. Box 532658 Atlanta, GA 30353</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,331.74
3.798	<p>Nonpriority creditor's name and mailing address Peter Nowak 1745 Redbud Pittsboro, NC 27312-7923</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.799	<p>Nonpriority creditor's name and mailing address Peter Pagano 805 Autumn Ct Raleigh, NC 27609-5337</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.800	<p>Nonpriority creditor's name and mailing address Phil Nyborg 75 Meadow Run Chapel Hill, NC 27517-6348</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.801	<p>Nonpriority creditor's name and mailing address Phillip Bejarno 5313 Alpine Dr Raleigh, NC 27609-4601</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.802	<p>Nonpriority creditor's name and mailing address Phyllis Parrish 608 S 2nd St Smithfield, NC 27577-4344</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$207.21
3.803	<p>Nonpriority creditor's name and mailing address Pitney Bowes Global Financial Attn: Managing Agent P.O. Box 981022 Boston, MA 02298</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Postage lease</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,046.02

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.804	Nonpriority creditor's name and mailing address Quality Comfort Attn: Managing Agent 725 Bethlehem Road Knightdale, NC 27545 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Business debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$769.89
3.805	Nonpriority creditor's name and mailing address R Glen Medders 122 N Harrington St Unit 1145 Raleigh, NC 27603-8083 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.806	Nonpriority creditor's name and mailing address Rebecca Klemp 313 Whitehall Way Cary, NC 27511-4854 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.807	Nonpriority creditor's name and mailing address Radell C Rasmussen PO Box 369 Washington, NC 27889-0369 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$588.12
3.808	Nonpriority creditor's name and mailing address Radell C Rasmussen PO Box 369 Washington, NC 27889-0369 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.809	Nonpriority creditor's name and mailing address Raleigh Bookkeeping Attn: Managing Agent 3901 Barrett Drive, Ste 304 Raleigh, NC 27609 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Accounting fees Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,600.00
3.810	Nonpriority creditor's name and mailing address Ralph Ashworth 110 Greenock Ct Cary, NC 27511 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Ticket refund claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$276.28

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.811	Nonpriority creditor's name and mailing address Ralph Ashworth 110 Greenock Ct Cary, NC 27511	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.812	Nonpriority creditor's name and mailing address Ralph Bamforth 412 E Rowan St Raleigh, NC 27609-5970	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.813	Nonpriority creditor's name and mailing address Ralph Flanary PO Box 27544 Raleigh, NC 27611-7544	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.814	Nonpriority creditor's name and mailing address Ralph Flanary PO Box 27544 Raleigh, NC 27611-7544	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.815	Nonpriority creditor's name and mailing address Ray Cheely 2601 Southwinds Run Apex, NC 27502-6514	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.816	Nonpriority creditor's name and mailing address Ray Cheely 2601 Southwinds Run Apex, NC 27502-6514	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.817	Nonpriority creditor's name and mailing address Ray Dennis 307 Potomac Dr Chocowinity, NC 27817-8869	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.818	Nonpriority creditor's name and mailing address Ray Evans 2724 Blue Ravine Rd Wake Forest, NC 27587-5438	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.819	Nonpriority creditor's name and mailing address Ray Hinnant PO Box 426 Wendell, NC 27591-0426	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.820	Nonpriority creditor's name and mailing address Rebecca Bassett 10423 Crisp Dr Raleigh, NC 27614-7770	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.821	Nonpriority creditor's name and mailing address Rebecca Cranford 248 Mccallum Rd Candor, NC 27229-9028	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.822	Nonpriority creditor's name and mailing address Rebecca Crosson 2223 The Cir Raleigh, NC 27608-1447	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.823	Nonpriority creditor's name and mailing address Rebecca Forrest 25 Batts Hill Rd New Bern, NC 28562-7365	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.824	Nonpriority creditor's name and mailing address Rebecca Hester 4408 Yadkin Dr Raleigh, NC 27609	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.825	Nonpriority creditor's name and mailing address Rebecca Mandigo 508 Hammond Oak Ln Wake Forest, NC 27587-4562	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.826	Nonpriority creditor's name and mailing address Rebecca Michaels 2306 Beechridge Rd Raleigh, NC 27608-1430	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.827	Nonpriority creditor's name and mailing address Rebecca Vann 129 Candlewood Rd. Rocky Mount, NC 27804-2105	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.828	Nonpriority creditor's name and mailing address Rebekah Watts 6639 Lewey Dr Cary, NC 27519-8518	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.829	Nonpriority creditor's name and mailing address Reece Carter 3212 Barnsley Ln Raleigh, NC 27604-5906	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.830	Nonpriority creditor's name and mailing address Renae Wohlers 2887 Micro Rd W Selma, NC 27576-7787	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.831	Nonpriority creditor's name and mailing address Renae Wohlers 2887 Micro Rd W Selma, NC 27576-7787	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.832	Nonpriority creditor's name and mailing address Rhonda Beese 321 Stromer Dr Cary, NC 27513-2754	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.833	Nonpriority creditor's name and mailing address Rhonda Beese 321 Stromer Dr Cary, NC 27513-2754	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.834	Nonpriority creditor's name and mailing address Rhonda Stone 4460 Old Raleigh Rd Wilson, NC 27893-8365	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.835	Nonpriority creditor's name and mailing address Rhonda Stone 4460 Old Raleigh Rd Wilson, NC 27893-8365	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.836	Nonpriority creditor's name and mailing address Richard Braham PO Box 37088 Raleigh, NC 27627-7088	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.837	Nonpriority creditor's name and mailing address Richard deButts 101 Parkwalk Ct Cary, NC 27519-6635	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.838	Nonpriority creditor's name and mailing address Richard Emerick 5509 Peakton Dr Raleigh, NC 27614-9707	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.839	Nonpriority creditor's name and mailing address Richard Ferro 6832 Market Street #A Wilmington, NC 28405	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.840	Nonpriority creditor's name and mailing address Richard Mechalske 171 Wagon Dr Bracey, VA 23919-2946	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.841	Nonpriority creditor's name and mailing address Richard Morris 101 Rockhaven Ct Cary, NC 27518-2257	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.842	Nonpriority creditor's name and mailing address Richard Phillips 101 Airstrip Rd Kill Devil Hills, NC 27948-8134	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.843	Nonpriority creditor's name and mailing address Richard Shirk 141 Wee Loch Dr Cary, NC 27511-3885	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.844	Nonpriority creditor's name and mailing address Richard Welch 122 Inez Dr Angier, NC 27501-6717	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.845	Nonpriority creditor's name and mailing address Rick Guirlanger 3340 Ocotea St Raleigh, NC 27607-3140	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.846	Nonpriority creditor's name and mailing address Rick Oler 502 Heathwick Dr Knightdale, NC 27545-8085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.847	Nonpriority creditor's name and mailing address Robert Cerwin 2501 Lewis Farm Rd Raleigh, NC 27608-1911	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.848	Nonpriority creditor's name and mailing address Robert Fick 97612 Franklin Rdg Chapel Hill, NC 27517-8357	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.849	Nonpriority creditor's name and mailing address Robert Herzog 139 Deer Ridge Dr Selma, NC 27576-5737	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.850	Nonpriority creditor's name and mailing address Robert Hewitt 2904 Snapswell St Raleigh, NC 27614-7569	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.851	Nonpriority creditor's name and mailing address Robert Holm 104 Witham Ct Holly Springs, NC 27540-3315	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.852	Nonpriority creditor's name and mailing address Robert Kastl 1217 Dalgarven Dr Apex, NC 27502-3931	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.853	Nonpriority creditor's name and mailing address Robert Kastl 1217 Dalgarven Dr Apex, NC 27502-3931	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$344.88
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.854	Nonpriority creditor's name and mailing address Robert L Brandon 108 First Light Trl Clayton, NC 27527-6904	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.855	Nonpriority creditor's name and mailing address Robert Lamphier 207 Summerwinds Dr Cary, NC 27518-9640	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.856	Nonpriority creditor's name and mailing address Robert Lupella 63 Tally Ho Dr Selma, NC 27576-9138	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.857	Nonpriority creditor's name and mailing address Robert Mikusa 2432 Deanwood Dr Raleigh, NC 27615-3994	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.858	Nonpriority creditor's name and mailing address Robert Patterson 1413 Sandusky Ln Raleigh, NC 27614-7514	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$828.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.859	Nonpriority creditor's name and mailing address Robert Pruett 6 Ingram Ct Durham, NC 27713-7186	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.860	Nonpriority creditor's name and mailing address Robert Shaw West 325 Sun Forest Way Chapel Hill, NC 27517-6360	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.861	Nonpriority creditor's name and mailing address Robert Shertz 301 Fayetteville St #2606 Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.862	Nonpriority creditor's name and mailing address Robert Wolf 6588 Saddlehorn Dr Rocky Mount, NC 27803-8365	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.863	Nonpriority creditor's name and mailing address Roberta Andrews 107 Autumn Chase Dr Raleigh, NC 27613-3279	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.864	Nonpriority creditor's name and mailing address Roberta Andrews 107 Autumn Chase Dr Raleigh, NC 27613-3279	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.865	Nonpriority creditor's name and mailing address Rod Allen 3504 Corin Ct Raleigh, NC 27612-4100	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.866	Nonpriority creditor's name and mailing address Rod Pitta 8812 Life Ln Raleigh, NC 27615-4001	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.867	Nonpriority creditor's name and mailing address Rodney Realon 5708 Hedgemoor Dr Raleigh, NC 27612-6322	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.868	Nonpriority creditor's name and mailing address Roger A. Rivera 1333 Heritage Hills Way Wake Forest, NC 27587-4467	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.869	Nonpriority creditor's name and mailing address Roland Lautenbach 12117 Betts Ln Raleigh, NC 27614-9410	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.870	Nonpriority creditor's name and mailing address Ron Moore 8700 Southampton Dr Raleigh, NC 27615-1856	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.871	Nonpriority creditor's name and mailing address Ron Pledger 204 Rivercrest Dr Greenville, NC 27858-9001	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$229.92
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.872	Nonpriority creditor's name and mailing address Ron Pledger 204 Rivercrest Dr Greenville, NC 27858-9001	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.873	Nonpriority creditor's name and mailing address Ron Pledger 204 Rivercrest Dr Greenville, NC 27858-9001	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.874	Nonpriority creditor's name and mailing address Ron Stumpo 8121 Ebenezer Church Rd Raleigh, NC 27612-7307	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.875	Nonpriority creditor's name and mailing address Ron Tarter 605 Queensferry Rd Cary, NC 27511-6320	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$392.08
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.876	Nonpriority creditor's name and mailing address Ronald Garsik 110 Hidden Creek Ln Garner, NC 27529-8491	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.877	Nonpriority creditor's name and mailing address Ronald Maddox 132 Danagher Ct Holly Springs, NC 27540-4785	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.878	Nonpriority creditor's name and mailing address Ronald Munk 8831 Cypress Lakes Apt 502 Raleigh, NC 27615	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$616.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.879	Nonpriority creditor's name and mailing address Ronald Reichen 3120 White Dove Ct Raleigh, NC 27606-8475	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.880	Nonpriority creditor's name and mailing address Ronald Varol 212 Brendan Choice Cary, NC 27511	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.881	<p>Nonpriority creditor's name and mailing address Ronald Wilder 88 Stonecrop Cir Littleton, NC 27850-8113</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.882	<p>Nonpriority creditor's name and mailing address Ronnie Davis 104 Bluegrass Dr Garnet, NC 27529-4411</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.883	<p>Nonpriority creditor's name and mailing address Rose-Paul Blackwell 185 Mockingbird Ct Pinehurst, NC 28374-8109</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.884	<p>Nonpriority creditor's name and mailing address Rosellen McCrory 8804 Braceridge Rd Raleigh, NC 27613-5374</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.885	<p>Nonpriority creditor's name and mailing address Rosemarie Authier 908 Crystalline Dr Raleigh, NC 27615-4966</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.886	<p>Nonpriority creditor's name and mailing address Ross Leavens 123 Wilander Dr Cary, NC 27511-6106</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.887	<p>Nonpriority creditor's name and mailing address Roy Teel 2128 Clark Ave #452 Raleigh, NC 27605</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.888	<p>Nonpriority creditor's name and mailing address RR Donnelley Attn: Managing Agent 4101 Winfield Road Warrenville, IL 60555</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$209.14
3.889	<p>Nonpriority creditor's name and mailing address Sally Spencer 104 Loch Pointe Dr Cary, NC 27518-8418</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.890	<p>Nonpriority creditor's name and mailing address Salvatore Pennica 188 Thornwhistle Pl Garner, NC 27529-3885</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.891	<p>Nonpriority creditor's name and mailing address Sandra Walker 220 W Young St Rolesville, NC 27571-9517</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$689.76
3.892	<p>Nonpriority creditor's name and mailing address Sandy Baker 171 Smith Rd Smithfield, NC 27577-8015</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$276.28
3.893	<p>Nonpriority creditor's name and mailing address Sandy Harris 207 Canterbury Rd Washington, NC 27889-5407</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.894	<p>Nonpriority creditor's name and mailing address Sarah Durgin 4616 Hunters Creek Lane Raleigh, NC 27606</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.895	Nonpriority creditor's name and mailing address Sarah McCracken Cobb 2313 Hamrick Dr Raleigh, NC 27615-2514	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.896	Nonpriority creditor's name and mailing address SC Robinson 4604 Rockwood Dr Raleigh, NC 27612-3539	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.897	Nonpriority creditor's name and mailing address Scott Cabaniss 801 Misty Isle PI Raleigh, NC 27615-1548	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.898	Nonpriority creditor's name and mailing address Scott Engler 534 Lake Royale Louisburg, NC 27549-9571	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.899	Nonpriority creditor's name and mailing address Scott Guebert 681 Rosewood Ave Martinsville, VA 24112-0975	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.900	Nonpriority creditor's name and mailing address Scott Harris 7824 Kingsbrook Ct Wake Forest, NC 27587-5837	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.901	Nonpriority creditor's name and mailing address Scott Slifer 108 Richelieu Dr Cary, NC 27518-8633	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.902	<p>Nonpriority creditor's name and mailing address Scott Tease 3118 Hines Dr Raleigh, NC 27609-7814</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$552.56
3.903	<p>Nonpriority creditor's name and mailing address Scott W. Sample 112 E Fleming Farm Dr Youngsville, NC 27596-9224</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.904	<p>Nonpriority creditor's name and mailing address Shannon Media Inc. Attn: Managing Agent 1777 Fordham Blvd, Ste 105 Chapel Hill, NC 27514</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,435.00
3.905	<p>Nonpriority creditor's name and mailing address Shannon Suggs 801 West Castle Ct Sanford, NC 27330-7087</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$459.84
3.906	<p>Nonpriority creditor's name and mailing address Sharon Creech 2108 Vandora Springs Rd. Garner, NC 27529</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$691.52
3.907	<p>Nonpriority creditor's name and mailing address Sharon Lewis 157 Hawthorne Dr Pine Knoll Shores, NC 28512-6515</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.908	<p>Nonpriority creditor's name and mailing address Sharon Thorne 2813 Walden Rd Apex, NC 27502-9680</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$459.84

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.909	Nonpriority creditor's name and mailing address Sheila Ahler 2689 Beckwith Rd Apex, NC 27523-7108	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.910	Nonpriority creditor's name and mailing address Sheila Ogle 215 S Academy St Cary, NC 27511-3328	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.911	Nonpriority creditor's name and mailing address Sheron Bender PO Box 70 Pollocksville, NC 28573-0070	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.912	Nonpriority creditor's name and mailing address Sherri Johnson PO Box 232 Kenly, NC 27542-0232	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$294.06
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.913	Nonpriority creditor's name and mailing address Sherry Frost 8404 Largo Springs Ct Raleigh, NC 27613-5252	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.914	Nonpriority creditor's name and mailing address Sherry Wilner 108 Langdale Place Cary, NC 27513	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
3.915	Nonpriority creditor's name and mailing address Shirley Parker 919 Union St Cary, NC 27511-3755	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$259.32
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Date(s) debt was incurred _____		
Last 4 digits of account number _____		
Basis for the claim: Ticket refund claim		
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.916	Nonpriority creditor's name and mailing address Shirley Sharek 16 Meeting St Clayton, NC 27527-7084	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.917	Nonpriority creditor's name and mailing address Shoshana Serxner-Merchant 705 Dixie Trl Raleigh, NC 27607-4154	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.918	Nonpriority creditor's name and mailing address Sidney Dalis PO Box 5869 Cary, NC 27512-5869	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.919	Nonpriority creditor's name and mailing address Sidney Dalis PO Box 5869 Cary, NC 27512-5869	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.920	Nonpriority creditor's name and mailing address Simon Bartle 12221 Kyle Abbey Ln Raleigh, NC 27613-6272	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.921	Nonpriority creditor's name and mailing address Skip Hill 3100 Smoketree Ct Ste 600 Raleigh, NC 27604-1050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.922	Nonpriority creditor's name and mailing address Sloan Oliver 1406 Bloomingdale Drive Cary, NC 27511	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.923	Nonpriority creditor's name and mailing address Smedes York 2108 Clark Ave Raleigh, NC 27605-1606	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.924	Nonpriority creditor's name and mailing address Sondra M Devincenzo 7912 River Ridge Rd Wake Forest, NC 27587-9355	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.925	Nonpriority creditor's name and mailing address Spectrum Reach Attn: Managing Agent P.O. Box 936671 Atlanta, GA 31193	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Business debt</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.926	Nonpriority creditor's name and mailing address Stacey Privette 501 Moultonboro Ave Wake Forest, NC 27587-5532	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.927	Nonpriority creditor's name and mailing address Staci Dorr 605 Hobson Wood Ct Garner, NC 27529-4840	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.928	Nonpriority creditor's name and mailing address Stacy Ojala 1321 Loghouse St Wake Forest, NC 27587-4641	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.929	Nonpriority creditor's name and mailing address Stancil CPA Attn: Managing Agent 4909 Wlndy Hill Drive Raleigh, NC 27609	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Accounting fees</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.930	Nonpriority creditor's name and mailing address Stephanie Johnson 103 Ackley Ct Cary, NC 27513-6300	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$276.28
3.931	Nonpriority creditor's name and mailing address Stephanie Mason 5111 Edinborough Rd Greensboro, NC 27406-8327	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$392.08
3.932	Nonpriority creditor's name and mailing address Stephanie Trunzo 330 Forest Bridge Rd Youngsville, NC 27596-7483	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$828.84
3.933	Nonpriority creditor's name and mailing address Stephen Gillespie 507 Homegate Cir Apex, NC 27502-6806	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.934	Nonpriority creditor's name and mailing address Stephen Keto 305 Ortega Rd Raleigh, NC 27609-5821	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.935	Nonpriority creditor's name and mailing address Steve Chaney 1023 Burning Tree Dr Chapel Hill, NC 27517-5610	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$691.52
3.936	Nonpriority creditor's name and mailing address Steve Derbyshire 6300 Winthrop Dr Raleigh, NC 27612-2148	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.937	Nonpriority creditor's name and mailing address Steve Freedman 2621 Forest Lake Ct Wake Forest, NC 27587-7908	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.938	Nonpriority creditor's name and mailing address Steve Hill 300 Bentpine Dr Raleigh, NC 27603-3885	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.939	Nonpriority creditor's name and mailing address Steve Hill 300 Bentpine Dr Raleigh, NC 27603-3885	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.940	Nonpriority creditor's name and mailing address Steven Baker 1576 Indian Camp Mountain Rd Rosman, NC 28772	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.941	Nonpriority creditor's name and mailing address Steven Hess 3601 Blueberry Dr Raleigh, NC 27612-4221	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.942	Nonpriority creditor's name and mailing address Steven Hunter 121 S Bloodworth St Raleigh, NC 27601-1503	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.943	Nonpriority creditor's name and mailing address Steven Lord 1621 Westhaven Dr Raleigh, NC 27607-4745	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.944	Nonpriority creditor's name and mailing address Steven Lord 1621 Westhaven Dr Raleigh, NC 27607-4745	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.945	Nonpriority creditor's name and mailing address Steven Scott 7021 Sevilleen Dr Sw Ocean Isle Beach, NC 28469	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.946	Nonpriority creditor's name and mailing address Stuart Phoenix 925 Holt Dr Raleigh, NC 27608-2335	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.947	Nonpriority creditor's name and mailing address Stuart Stern 1995 NW Cary Pkwy Unit 330 Morrisville, NC 27560-4606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.948	Nonpriority creditor's name and mailing address Sue Ellen Weekes 100 Java Ct Cary, NC 27519-5512	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.949	Nonpriority creditor's name and mailing address Sue Hall 10337 Turnbull Rd Fayetteville, NC 28312-7475	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.950	Nonpriority creditor's name and mailing address Sue Joslyn 5109 Ten Point Trl Wake Forest, NC 27587-6351	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.951	<p>Nonpriority creditor's name and mailing address Sue Liverman 415 Curtis St N Ahoskie, NC 27910-2517</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.952	<p>Nonpriority creditor's name and mailing address Susan Blackley 1000 Kirkeenan Cir Morrisville, NC 27560-7092</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.953	<p>Nonpriority creditor's name and mailing address Susan Brooks 5720 Magellan Way Apt 107 Raleigh, NC 27612-2257</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.954	<p>Nonpriority creditor's name and mailing address Susan Eppers 931 Sethcreek Dr Fuquay Varina, NC 27526-5154</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.955	<p>Nonpriority creditor's name and mailing address Susan Gates 200 Rose Valley Woods Drive Cary Cary, NC 27513</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.956	<p>Nonpriority creditor's name and mailing address Susan Goldhaber 4112 Gardenlake Dr Raleigh, NC 27612-6954</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.957	<p>Nonpriority creditor's name and mailing address Susan Hubbard 5752 Cavanaugh Dr Raleigh, NC 27614-7241</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.958	Nonpriority creditor's name and mailing address Susan Kofsky 238 Appsmill Pl Fuquay Varina, NC 27526-6939	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.959	Nonpriority creditor's name and mailing address Susan Mitchell 6112 Parker Croft Ct Raleigh, NC 27609-8208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.960	Nonpriority creditor's name and mailing address Susan Segre 301 Duncan St Raleigh, NC 27608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.961	Nonpriority creditor's name and mailing address Susan Wallace 121 Quail Run Smithfield, NC 27577-9427	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.962	Nonpriority creditor's name and mailing address Susan Whitehouse 1205 Dorleath Ct Raleigh, NC 27614-8036	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.963	Nonpriority creditor's name and mailing address Susanna Robinson 404 Widdington Ln Cary, NC 27519-6699	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.964	Nonpriority creditor's name and mailing address Suzanne Carver 4604 White Chapel Way Raleigh, NC 27615-1674	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.965	Nonpriority creditor's name and mailing address Suzanne Eaton Jones 5705 Wysteria Dr Fuquay Varina, NC 27526-7584	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.966	Nonpriority creditor's name and mailing address Suzanne Eaton Jones 5705 Wysteria Dr Fuquay Varina, NC 27526-7584	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.967	Nonpriority creditor's name and mailing address Suzanne Prince 523 S. West Street Raleigh, NC 27601	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.968	Nonpriority creditor's name and mailing address Sylvia Cobb PO Box 5 Pinetops, NC 27864-0005	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.969	Nonpriority creditor's name and mailing address Sylvia Williams 235 Tayside St Clayton, NC 27520-4995	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.970	Nonpriority creditor's name and mailing address T. Lawrence Jackson 1101 Parkridge Ln Raleigh, NC 27605-3285	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.971	Nonpriority creditor's name and mailing address Tammy Murray 618 Barbour St Clayton, NC 27520-2714	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.972	Nonpriority creditor's name and mailing address Tanisha Woods 5113 Neuse Commons Lane Raleigh, NC 27616 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$276.28
3.973	Nonpriority creditor's name and mailing address Tara Dutta 104 Southbank Dr Cary, NC 27518-9759 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.974	Nonpriority creditor's name and mailing address Tara Hill 800 Saint Marys St Raleigh, NC 27605 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.975	Nonpriority creditor's name and mailing address Teresa Allgood 218 N Shorewood Dr Emerald Isle, NC 28594-3319 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.976	Nonpriority creditor's name and mailing address Teresa Buterbaugh 103 Links End Dr Cary, NC 27513-5691 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$784.16
3.977	Nonpriority creditor's name and mailing address Teresa Stephens 609 Delany drive Raleigh, NC 27610 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$604.46
3.978	Nonpriority creditor's name and mailing address Terra Sosa 8408 Camellia Dr Raleigh, NC 27613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,037.28

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.979	Nonpriority creditor's name and mailing address Terry Haggerty 725 Royal Anne Ln Apt 301 Raleigh, NC 27615-7821	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$392.08
3.980	Nonpriority creditor's name and mailing address Terry Haggerty 725 Royal Anne Ln Apt 301 Raleigh, NC 27615-7821	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$345.76
3.981	Nonpriority creditor's name and mailing address Texanna Montague 10305 Penny Rd Raleigh, NC 27606	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,568.32
3.982	Nonpriority creditor's name and mailing address Thad O'Briant 4709 Stanford St Raleigh, NC 27609-5333	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$552.56
3.983	Nonpriority creditor's name and mailing address The Car Park Attn: Managing Agent P.O. Box 781 Raleigh, NC 27602	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,090.00
3.984	Nonpriority creditor's name and mailing address Theresa Amerson 9113 Hometown Dr Raleigh, NC 27615-3162	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$459.84
3.985	Nonpriority creditor's name and mailing address Theresa Hodges 950 Dover Fort Barnwell Rd Dover, NC 28526-9216	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.986	Nonpriority creditor's name and mailing address Thomas Aubrey 52 Goldenrod Dr Whispering Pines, NC 28327-9352	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.987	Nonpriority creditor's name and mailing address Thomas Barnhill 711 Brooks Ave Raleigh, NC 27607-4131	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.988	Nonpriority creditor's name and mailing address Thomas Eifler 102 Clubstone Ln Cary, NC 27518-8905	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.989	Nonpriority creditor's name and mailing address Thomas Haizlip Jr. 400 Tyneloch Dr Banner Elk, NC 28604-9488	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.990	Nonpriority creditor's name and mailing address Thomas Herbert 5008 Lansdowne Dr Durham, NC 27712-1902	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.991	Nonpriority creditor's name and mailing address Thomas Iuliucci III 4109 Balsam Dr Raleigh, NC 27612-3607	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.992	Nonpriority creditor's name and mailing address Thomasine Hardy PO Box 18065 Raleigh, NC 27619-8065	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: <u>Ticket refund claim</u>
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.993	Nonpriority creditor's name and mailing address Ticketmaster Attn: Managing Agent 14643 Collections Center Dr Chicago, IL 60693 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$38,763.36
3.994	Nonpriority creditor's name and mailing address Tim Bartlett 5645 Thistleton Ln Raleigh, NC 27606-8966 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.995	Nonpriority creditor's name and mailing address Tim Hogan 601 Democracy St Raleigh, NC 27603-3671 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.996	Nonpriority creditor's name and mailing address Tim Lancaster 2200 Effingham Cir Raleigh, NC 27615-3826 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.997	Nonpriority creditor's name and mailing address Timothy Reeder 1413 Fox Hollow Dr Ayden, NC 28513-7613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16
3.998	Nonpriority creditor's name and mailing address Tina Pell 76 Little Giant Way Wendell, NC 27591-9742 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$552.56
3.999	Nonpriority creditor's name and mailing address Tippi Hales 92 S Two Does Ln Clayton, NC 27520-3830 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.100 0	Nonpriority creditor's name and mailing address Todd Engstrom 2519 White Oak Rd Raleigh, NC 27609-7613	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 1	Nonpriority creditor's name and mailing address Todd Snitchler 36 Chestertown Drive Pinehurst, NC 28374	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 2	Nonpriority creditor's name and mailing address Todd Zimmerman 1017 Sedbrook Ln Winterville, NC 28590-6008	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 3	Nonpriority creditor's name and mailing address Tom Bradshaw 7416 Grist Mill Rd Raleigh, NC 27615-5409	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 4	Nonpriority creditor's name and mailing address Tom Bradshaw 7416 Grist Mill Rd Raleigh, NC 27615-5409	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 5	Nonpriority creditor's name and mailing address Tom Bradshaw 7416 Grist Mill Rd Raleigh, NC 27615-5409	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 6	Nonpriority creditor's name and mailing address Tom Darcey 7512 Hasentree Way Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$537.34
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.100 7	Nonpriority creditor's name and mailing address Tom Lauria 64 Sweetbay Park Youngsville, NC 27596-7975	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 8	Nonpriority creditor's name and mailing address Tom Lindley 1304 Cameron View Ct Raleigh, NC 27607-3362	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.100 9	Nonpriority creditor's name and mailing address Tom Russell 301 Fayetteville St Unit 2712 Raleigh, NC 27601-2178	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101 0	Nonpriority creditor's name and mailing address Tom Whittlesey 1132 Batchelor Rd Apex, NC 27523-9453	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101 1	Nonpriority creditor's name and mailing address Tommy Frazier 1812 Parker Ln Henderson, NC 27536-3543	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101 2	Nonpriority creditor's name and mailing address Tonia Pridgen 3141 Hemlock Forest Cir Apt 204 Raleigh, NC 27612-2331	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$345.76
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.101 3	Nonpriority creditor's name and mailing address Tonia Pridgen 3141 Hemlock Forest Cir Apt 204 Raleigh, NC 27612-2331	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.101 4	Nonpriority creditor's name and mailing address Tony Cartledge 3912 Inkberry Ct Apex, NC 27539-8867	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.101 5	Nonpriority creditor's name and mailing address Tonya T. Day 300 Swans Mill Xing Raleigh, NC 27614-9470	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.101 6	Nonpriority creditor's name and mailing address Travis Groome 1104 Longstone Way Raleigh, NC 27614	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,176.24
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.101 7	Nonpriority creditor's name and mailing address Travis O'quinn 1101 Ladowick Lane Wake Forest, NC 27587	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$587.54
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.101 8	Nonpriority creditor's name and mailing address Triangle Family Magazine, LLC Attn: Managing Agent 4818 Six Forks Road, Ste 204 Raleigh, NC 27609	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,700.00
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Business debt</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.101 9	Nonpriority creditor's name and mailing address Truist Bank Attn: Managing Agent or Officer P.O. Box 1626 Wilson, NC 27894	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$135,000.00
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Credit card debt</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.102 0	Nonpriority creditor's name and mailing address Univision Receivables Co LLC Attn: Managing Agent P.O. Box 74019 Los Angeles, CA 90074	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,000.00
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Business debt</u>	
	Date(s) debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.102 1	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$340.20
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 2	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$287.40
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 3	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$340.20
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 4	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 5	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$160.89
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 6	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$204.12
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.102 7	Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$616.32
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.102 8	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$204.12
3.102 9	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$408.24
3.103 0	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$204.12
3.103 1	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$268.15
3.103 2	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$172.44
3.103 3	<p>Nonpriority creditor's name and mailing address UT Williamson PO Box 7057 Wilson, NC 27895-7057</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$204.12
3.103 4	<p>Nonpriority creditor's name and mailing address Valerie Bass 7904 Rooksley Ct Raleigh, NC 27615-4712</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$392.08

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.103 5	Nonpriority creditor's name and mailing address Van Eure 10709 Beaver Pond Ln Raleigh, NC 27614-9661	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 6	Nonpriority creditor's name and mailing address Van Eure 10709 Beaver Pond Ln Raleigh, NC 27614-9661	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 7	Nonpriority creditor's name and mailing address Vance Clayton 3500 Ranlo Dr Raleigh, NC 27612-5022	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 8	Nonpriority creditor's name and mailing address Vernon Hunter 1925 Sunset Dr. Raleigh, NC 27608-2453	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 9	Nonpriority creditor's name and mailing address Vicci Elder 1931 Falls Landing Dr Unit 104 Raleigh, NC 27614-9830	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104 0	Nonpriority creditor's name and mailing address Vickie S. Byrd 5004 Bogue Sound Ct Emerald Isle, NC 28594-3600	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104 1	Nonpriority creditor's name and mailing address Victor Angelo 1340 Holly Blue Run Fuquay-Varina, NC 27526	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date(s) debt was incurred _____	Basis for the claim: Ticket refund claim
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.104 2	Nonpriority creditor's name and mailing address Victor Batiz 4301 Wedgewood Dr Raleigh, NC 27604-4943	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 3	Nonpriority creditor's name and mailing address Victor Batiz 4301 Wedgewood Dr Raleigh, NC 27604-4943	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$459.84
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 4	Nonpriority creditor's name and mailing address Virginia McLaurin 202 Old Mill Rd Oxford, NC 27565-2562	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 5	Nonpriority creditor's name and mailing address Virginia Parker 1205 Inlet Pl Raleigh, NC 27615-4442	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 6	Nonpriority creditor's name and mailing address Wade Horn 12420 Bayleaf Church Rd Raleigh, NC 27614-9167	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 7	Nonpriority creditor's name and mailing address Walter Credle 1309 Neuse Ridge Dr Clayton, NC 27527-5368	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$784.16
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.104 8	Nonpriority creditor's name and mailing address Walter Czmiel 100 Greymist Ln Cary, NC 27518-8966	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$691.52
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.104 9	<p>Nonpriority creditor's name and mailing address Walter Magazine c/o The Pilot LLC Attn: Managing Agent P.O. Box 58 Southern Pines, NC 28388</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Business debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,850.00
3.105 0	<p>Nonpriority creditor's name and mailing address Wanda English 1109 Lands End Ct Raleigh, NC 27606-8074</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.105 1	<p>Nonpriority creditor's name and mailing address Wayne Eckert 690 Great Ridge Pkwy Chapel Hill, NC 27516</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$604.46
3.105 2	<p>Nonpriority creditor's name and mailing address Wayne Jarrett 5016 Will O Dean Rd Raleigh, NC 27616-5445</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.105 3	<p>Nonpriority creditor's name and mailing address Wendy Bishop 10350 Dapping Dr. Raleigh, NC 27614</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16
3.105 4	<p>Nonpriority creditor's name and mailing address Wendy O'Connor 4417 Willow Moss Way Southport, NC 28461-2677</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$748.60
3.105 5	<p>Nonpriority creditor's name and mailing address Wesley Chesson 1028 Marlowe Rd Raleigh, NC 27609-6962</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Ticket refund claim</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$784.16

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.105 6	Nonpriority creditor's name and mailing address William B. Johnson 204 McGinnis Dr Atlantic Beach, NC 28512-6313	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105 7	Nonpriority creditor's name and mailing address William Campbell 116 Council Gap Ct Cary, NC 27513-8737	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,568.32
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105 8	Nonpriority creditor's name and mailing address William Domb 417 Captains Cv Unit F Edenton, NC 27932-8880	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.105 9	Nonpriority creditor's name and mailing address William Knouse 619 Dorothea Dr Raleigh, NC 27603-2101	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106 0	Nonpriority creditor's name and mailing address William Knouse 619 Dorothea Dr Raleigh, NC 27603-2101	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$276.28
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106 1	Nonpriority creditor's name and mailing address William Pelletier 853 Flower Manor Dr Wendell, NC 27591	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$552.56
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Ticket refund claim</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.106 2	Nonpriority creditor's name and mailing address WKIX FM 102.9 FM Attn: Managing Agent 3012 Highwoods Blvd., Ste 201 Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,711.00
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
	Basis for the claim: <u>Business debt</u>	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	The North Carolina Theatre	Case number (if known)
Name		
3.106 3	Nonpriority creditor's name and mailing address WNCN Attn: Managing Agent 33096 Collections Center Dr Chicago, IL 60693	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,153.11 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 4	Nonpriority creditor's name and mailing address WPLW-FM Attn: Managing Agent 3012 Highwoods Blvd., Ste 201 Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,289.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 5	Nonpriority creditor's name and mailing address WRAL Attn: Managing Agent P.O. Box 948904 Atlanta, GA 30394	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,622.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 6	Nonpriority creditor's name and mailing address WRAL Digital Attn: Managing Agent P.O. Box 948140 Atlanta, GA 30394	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,549.84 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 7	Nonpriority creditor's name and mailing address WRAL- HD3 Attn: Managing Agent P.O. Box 60424 Charlotte, NC 28260	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 8	Nonpriority creditor's name and mailing address WTVD Attn: Managing Agent 319 Fayetteville Street, Ste 107 Raleigh, NC 27601	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$33,500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Date(s) debt was incurred _____		Basis for the claim: <u>Business debt</u>
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	The North Carolina Theatre	Case number (if known)	
Name			
3.106 9	Nonpriority creditor's name and mailing address WUNC 91.5 Attn: Managing Agent 120 Friday Center Drive Chapel Hill, NC 27517 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,130.00
3.107 0	Nonpriority creditor's name and mailing address Yvette Aviles 2438 Celtic Dr Fayetteville, NC 28306-8505 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$552.56
3.107 1	Nonpriority creditor's name and mailing address Yvonne Howell 6109 Wilkinsburg Rd Raleigh, NC 27612-6734 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ticket refund claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$588.12

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

- 5a. Total claims from Part 1
 5b. Total claims from Part 2

- 5c. Total of Parts 1 and 2
 Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	0.00
5b.	+	\$ 1,673,225.91
5c.	\$	1,673,225.91

Fill in this information to identify the case:

Debtor name The North Carolina Theatre

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

IT support and maintenance

State the term remaining

**Celito Communications, LLC
Attn: Managing Agent
P.O. Box 37129
Raleigh, NC 27627**

List the contract number of any government contract

2.2. State what the contract or lease is for and the nature of the debtor's interest

Contract 32941-01 for play 4/14/24 - 4/28/24

State the term remaining

**Duke Energy Center
Attn: Managing Agent
2 E. South Street
Raleigh, NC 27601**

List the contract number of any government contract

2.3. State what the contract or lease is for and the nature of the debtor's interest

Contract 33714-01 for play 6/16/24 - 6/30/24

State the term remaining

**Duke Energy Center
Attn: Managing Agent
2 E. South Street
Raleigh, NC 27601**

List the contract number of any government contract

2.4. State what the contract or lease is for and the nature of the debtor's interest

Contract 33622-01 for play 11/10/24 - 11/24/24

State the term remaining

**Duke Energy Center
Attn: Managing Agent
2 E. South Street
Raleigh, NC 27601**

List the contract number of any government contract

Debtor 1 **The North Carolina Theatre**

First Name

Middle Name

Last Name

Case number (if known) _____

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

- 2.5. State what the contract or lease is for and the nature of the debtor's interest

Employment agreement

State the term remaining

List the contract number of any government contract

Eric Woodall

- 2.6. State what the contract or lease is for and the nature of the debtor's interest

Lease of building

State the term remaining

List the contract number of any government contract

K.D. Kennedy
714 W. Johnson Street
Raleigh, NC 27603

- 2.7. State what the contract or lease is for and the nature of the debtor's interest

Contract 35126-01 for play 8/10/24 - 8/18/24

State the term remaining

List the contract number of any government contract

Martin Marietta Center for Arts
Attn: Managing Agent
2 E. South Street
Raleigh, NC 27601

- 2.8. State what the contract or lease is for and the nature of the debtor's interest

Postage machine lease

State the term remaining

List the contract number of any government contract

Pitney Bowes Global Financial
Attn: Managing Agent
P.O. Box 981022
Boston, MA 02298

- 2.9. State what the contract or lease is for and the nature of the debtor's interest

Water services

State the term remaining

List the contract number of any government contract

Purologix Water Services, Inc.
Attn: Managing Agent
105 Technical Court
Garner, NC 27529

Fill in this information to identify the case:

Debtor name The North Carolina Theatre

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: **Codebtor**

Column 2: **Creditor**

Name

Mailing Address

Name

Check all schedules that apply:

- D
 E/F
 G

2.1

Street

City

State

Zip Code

2.2

Street

City

State

Zip Code

2.3

Street

City

State

Zip Code

2.4

Street

City

State

Zip Code

- D
 E/F
 G

- D
 E/F
 G

United States Bankruptcy Court
Eastern District of North Carolina

In re The North Carolina Theatre

Debtor(s)

Case No.

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
--	----------------	----------------------	------------------

-NONE-

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Chairman of the Board of Directors** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date February 23, 2024

Signature /s/ John A. Zaloom
John A. Zaloom

Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
Eastern District of North Carolina**

In re The North Carolina Theatre

Debtor(s)

Case No.

Chapter 11

VERIFICATION OF CREDITOR MATRIX

I, the Chairman of the Board of Directors of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: February 23, 2024

/s/ John A. Zaloom

John A. Zaloom/Chairman of the Board of Directors
Signer>Title

6AM City, Inc.
Attn: Managing Agent
P.O. Box 2505
Greenville, SC 29602

Alora Burton
657 Lipford Dr
Cary, NC 27519

Andrea Fox
3053 Granville Dr
Raleigh, NC 27609-6917

Al Conyers
1225 Harp St
Raleigh, NC 27604-8008

Amber Garcowski
1421 Falls River Ave
Raleigh, NC 27614-7704

Andrew Foshee
85 Sweet Gum
Pittsboro, NC 27312-7977

Alan Coats
131 Wilma St
Angier, NC 27501-9133

Amna Cameron
121 Skipwyth Cir
Cary, NC 27513-2415

Andrew Fried
1420 Fawn Ridge Rd Nw
Concord, NC 28027-9066

Alan Lipson
2600 Sunnystone Way
Raleigh, NC 27613-7870

Amos Gentry Bullard
171 Springmoor Dr
Raleigh, NC 27615-4300

Andy Ammons
8404 Society Pl
Raleigh, NC 27615-3190

Alfred Edward Thompson
6141 River Landings Dr
Raleigh, NC 27604-6139

Amy Deshong
6201 Heacham Ct
Raleigh, NC 27614-9236

Andy Reyes
4004 Iron Horse Rd
Raleigh, NC 27616-5057

Alice Dunn
5100 Deer Creek Trl
Raleigh, NC 27616-6507

Amy Langdon
10176 NC50 Hwy N
Angier, NC 27501-8139

Angela Buffaloe
945 Buffaloe Rd
Garner, NC 27529-5186

Allen Kelly
1133 Redford Dr.
Raleigh, NC 27603-3587

Amy Moore
101 Katie Dr
Clayton, NC 27520-5509

Angela Carroll
1339 Brookhill Dr
Clayton, NC 27520-5568

Allen Mask
1123 Old Lystra Rd
Chapel Hill, NC 27517-9167

Amy Stroud
6000 Sentinel Dr
Raleigh, NC 27609-3512

Angela Maier
1324 Rodessa Run
Raleigh, NC 27607-6011

Allison Stafford
413 Hilltop View St
Cary, NC 27513-1685

Andrea Bosquez Porter
1117 N Blount St
Raleigh, NC 27604-1301

Anita Wagner
101 Silver Bluff St
Holly Springs, NC 27540-9392

Ann Benson
12171 Nc 50 Hwy N
Willow Spring, NC 27592-8160

Anne Louise Lord
1014 James Pl
Raleigh, NC 27605-1106

Aubrey Kerr Walker
PO Box 1161
Clayton, NC 27528-1161

Ann C. Garrard
210 Presidents Walk Ln
Cary, NC 27519-9305

Anne Morrell
232 Woodstaff Ave.
Wake Forest, NC 27587

Audrey Garrett
78 Willowcroft Ct
Dunn, NC 28334-6278

Ann Grimes
1501 Peachtree St
Goldsboro, NC 27530-3931

Anne Royster
399 Waverly Hills Dr
Cary, NC 27519-9776

Ayden Lee
812 Cooper Branch Rd
Clayton, NC 27520-4362

Ann Lowe Vodicka
650 Richardson Rd
Pittsboro, NC 27312

Annette Barros
1000 Old Mill Creek Ct
Raleigh, NC 27614-7199

Bankruptcy Administrator, EDNC
434 Fayetteville Street
Suite 640
Raleigh, NC 27601

Ann McKenzie
112 Boldleaf Ct
Cary, NC 27513-3812

AnnMarie Garza
8306 Mourning Dove Rd
Raleigh, NC 27615-3018

Barbara E. Trapnell
106 Lomond Ln
Cary, NC 27518-9747

Ann Ritter
320 Hillcrest Drive
Chocowinity, NC 27817

April Young
1436 Spring Garden Drive
Morrisville, NC 27560

Barbara Elish
1004 Cuthbert Ln
Durham, NC 27703-0289

Ann W. Hill
150 Lands End Rd Apt A23
Morehead City, NC 28557-8992

April Young Blackwell
8612 Stonechase Dr
Raleigh, NC 27613-6999

Barbara Glasgow
801 N Wakefield St
Zebulon, NC 27597-2342

Anna Churchill
Synergy Face & Body
8300 Health Park #229
Raleigh, NC 27615

Atha Price
1407 Knollwood Dr Nw
Wilson, NC 27896-1513

Barbara Harris
10812 Laurnet Pl
Raleigh, NC 27614-8990

Anna Moore
2226 Whitman Rd
Raleigh, NC 27607-6649

Atlas Stage Works
Attn: Managing Agent
3911 Beryl Road
Raleigh, NC 27607

Barbara Jean
1181 Saint Cloud Loop
Apex, NC 27523

Barbara Knott
1315 Still Monument Way
Raleigh, NC 27603-3493

Beth Chappell
3712 Jordan Shires Dr
New Hill, NC 27562-9334

Betty Byrum
441 Kings Hollow Dr
Raleigh, NC 27603-9469

Barbara Marley
120 Spring Hollow Ln
Cary, NC 27518-9726

Beth Dobbie
3550 Horton St
Raleigh, NC 27607-3400

Betty P. Moore
1520 Springmoor Cir
Raleigh, NC 27615-5704

Barbara Raess
1164 Saint Cloud Loop
Apex, NC 27523-6113

Beth Ryals
5232 Banks Haven Ct
Raleigh, NC 27603-8957

Beverly Rust
1202 Pine Valley Dr
New Bern, NC 28562-2938

Barry Gobble
702 Quarry Street
Raleigh, NC 27601

Betsy Brian Rollins
161 Montrose Dr
Durham, NC 27707-3900

Bill Brewer
8313 Castine Ct
Raleigh, NC 27613-4311

Becky Farmer
2509 Fairview Rd
Raleigh, NC 27608-1327

Betsy Eble
170 T C Justice Rd
Pittsboro, NC 27312-7876

Bill Stokes
906 Wellstone Cir
Apex, NC 27502-8532

Becky Raynor
1808 Greenwood St
Elizabethtown, NC 28337-9146

Betsy J Justice
145 Lake Pine Dr
Cary, NC 27511-4377

Bill Taylor
3711 Exchange Glenwood Place #2
Raleigh, NC 27612

Belinda Hiltbruner
1010 Gallop Dr
Clayton, NC 27520-8482

Betsy T. Douglass
7900 Rooksley Ct
Raleigh, NC 27615-4712

Billie Jo Cockman
1305 Slatestone Ct
Raleigh, NC 27615-4382

Ben Parrish
217 Change St.
New Bern, NC 28560-4906

Bettie Long
1298 Bethlehem School Rd
Hickory, NC 28601-9379

Billy Su
1937 Leben St
Apex, NC 27502-4418

Beth Brinson
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**United States Bankruptcy Court
Eastern District of North Carolina**

In re **The North Carolina Theatre**

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for The North Carolina Theatre in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [Check if applicable]

February 23, 2024

Date

/s/ Rebecca F. Redwine

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Signature of Attorney or Litigant
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